



COUNTY BOROUGH OF BOURNEMOUTH

Annual Report

of the

Medical Officer of Health

and

Principal

School Medical Officer

for the Year 1961

PUBLIC HEALTH DEPARTMENT,

17, ST. STEPHEN'S ROAD,

BOURNEMOUTH.

Telephone: Bournemouth 22066.



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To the Mayor, Aldermen and Councillors of the County Borough of Bournemouth.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the health and sanitary conditions of the County Borough of Bournemouth for the year 1961, the eighty-third in the series.

Vital Statistics

The Registrar-General's mid-year estimate of population showed an increase from 146,550 to 149,000, and although the provisional census population in 1961 was 153,965, it is upon the smaller figure that the vital statistics of the Borough have been calculated.

A total of 1,720 live births were registered, representing a birth rate of 11.54 per 1,000 of the population, very similar to the rate in 1960. Included in this total were 172 illegitimate births, exactly ten per cent. of the total, and exceeding the 1960 figure by 33. This

is a very high illegitimacy rate indeed, and although many of the unmarried mothers were not local girls and often became pregnant elsewhere, the possibility remains that even in our own population illegitimacy exceeds the national average.

Stillbirths were lower than in 1960, 20 compared with 24, representing a stillbirth rate of 11.5 per 1,000 total births.

Forty infants died before the age of one year, compared with 39 in 1960, giving an infant mortality rate of 23.3 per 1,000 live births. Thirty-two of these infants died before they were four weeks old, many due to prematurity or congenital abnormalities.

Deaths occurring in the Borough totalled 2,423, representing a death rate of 16.3 per 1,000 of the population, and an adjusted death rate of 10.9, both slightly lower rates than in 1960.

As before, the majority of deaths were due to chronic degenerative disease in elderly or aged persons.

There were no maternal deaths during the year.

Notifiable Infectious Diseases

The Borough remained comparatively free of infectious disease during the year, with the exception of a measles outbreak which caused 2,140 cases. There were no cases of poliomyelitis, diphtheria or typhoid fever, but there was a solitary imported case of paratyphoid fever in an air-crew member. There were ten cases of food poisoning and fifteen cases of Sonne dysentery.

Tuberculosis

Notifications of pulmonary tuberculosis were the lowest ever recorded, 37 cases compared with 66 cases in 1960, and there were six deaths. Five cases of non-pulmonary tuberculosis were also reported, with one death.

There have been few achievements more spectacular than those carried out by the chest and veterinary services in controlling the spread of human and bovine infection over the last two decades, and this once formidable disease now appears to be firmly under control.

Maternity and Child Welfare

The Council's arrangements for the care of mothers and young children remained substantially unchanged, but owing to increased attendances a weekly infant welfare clinic was held at Moordown Baptist Church instead of fortnightly. Total attendances at the 21 weekly sessions were 47,989, nearly four thousand more than in 1960, and although many family doctors have now their own infant welfare sessions at the surgery, it would seem that there is still a very considerable public demand for the type of clinic held by the local health authority.

Ante-natal facilities were continued as a once-weekly clinic held at "Avebury", 10 Madeira Road, and although this is a small clinic the attendances showed a slight increase in 1961.

Financial support was continued to the two Mother and Baby Homes in the Borough, at the Free Church Council's Home at 11 St. Alban's Avenue, and St. Thomas' Lodge, Charminster Road. Many unmarried mothers prefer to have their babies outside the area, and the Council made a grant towards the expenses of six local girls who were admitted to Mother and Baby Homes outside the Borough during 1961.

The Corporation Day Nursery at 10 Wellington Road continued to provide an efficient day-minding service for up to 45 babies and children below school age, and although it was only filled to capacity during the holiday season, a high average attendance was maintained throughout the year. Between one-half and two-thirds of admissions belong to the priority group, and non-priority cases are only admitted if no priority cases remain on the waiting list.

In addition, seven premises were registered under the Nursery and Child Minders (Regulation) Act, 1948, for the reception of 83 children.

The Domiciliary Services of the Corporation

Domiciliary Midwifery ;
Home Nursing ;
Domestic Helps ;
Health Visiting.

Without exception the domiciliary services of the Corporation reported increased activity, and as the local authority Development

Plan for the Health Service depends very largely on an expansion of its domiciliary services, the difficulty in even maintaining present establishments is a very serious matter. If the local authority plan fails, the Government's Hospital Plan must fail also, but the local authority is in the greater dilemma as the success of its plan is dependent on the availability of staff. Some means must be found of diverting some of the excellent material leaving our schools into work for the community instead of into blind-alley jobs whose only advantage is a high starting wage. And similarly, work for the community must be made into a progressive career with financial rewards equal to any other profession of comparable status.

The Ambulance Service

Once again the ambulance service met an increased demand in all sections of the work, and at times was barely equal to the strain imposed upon it. Consultations with the Hospital Management Committee have led to improved out-patient arrangements at the Royal Victoria Hospital, and every effort has been made to fulfil commitments without undue delay.

It is unfortunately inevitable that a busy ambulance service must, if it is to be used economically, employ methods which result in some patients being collected much earlier than the time of their hospital appointment. These inconveniences have, however, been kept to a minimum by careful scrutiny and analysis of hospital requirements, as far in advance of the journey as possible.

Vaccination and Immunisation

Vaccination and immunisation against smallpox, diphtheria, whooping cough, poliomyelitis, tetanus, tuberculosis and yellow fever have continued on the lines recommended by the Ministry of Health, and while acceptance rates are still nothing like as high as they should be to ensure complete protection, some progress has been made in the past year, particularly as regards "booster" doses against diphtheria.

Mental Health Service

The number of Bournemouth patients admitted to mental hospitals during 1961 was the highest ever recorded, being 13 per cent. in excess of admissions in the previous year.

Many cases improved rapidly under treatment and were discharged home with a request from the hospital that after-care be provided by the Department's social workers.

Unfortunately, the improvement was not always maintained, and approximately one-third of all hospital admissions had previously had a mental breakdown requiring hospitalization. Many of them lacked a stable and happy home life, and while some of the social disabilities of mental patients are incapable of correction for one reason or another, frequent visits by a capable and sympathetic social worker, together with medical and psychiatric supervision, would seem to offer the best hope of preventing a relapse.

The shortage of trained social workers in the mental health field, or of suitable candidates for training, is therefore a serious matter and must inevitably delay the implementation of the Council's Development Plan for the mental health services.

The proposals of the Wessex Regional Hospital Board for treatment sessions for the mentally disordered should ultimately prove satisfactory, but at the present time there are serious deficiencies such as inadequate facilities for young psychotics.

Sanitary Circumstances, Housing and Inspection of Food

Mr. William Riley, your Chief Public Health Inspector, has commented in detail on these very important problems of environmental hygiene. Investigations and action have followed very closely the routine adopted from previous years, and it is only by these painstaking and unspectacular enquiries into the external factors affecting the lives of the population that departures from the normal, indicating possible danger, are detected.

It remains for me to thank the Chairman and members of the Health Committee for their help and encouragement during the year.

My thanks are also due to my Deputy, Dr. E. W. Wright, and to Mr. J. W. Roberts, my Chief Administrative Assistant, and to all my staff for their loyal co-operation.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

WILLIAM FIELDING

Health Committee and Staff

as at 31st December, 1961

HEALTH COMMITTEE

The Mayor (Councillor D. S. Scott, J.P.)

Alderman A. H. Abbott (*Chairman*)

Councillor W. Collins (*Vice-Chairman*)

Council Members

Alderman	H. C. Brown, O.B.E.	Councillor	J. G. Middleton
„	T. Peaty	„	Miss S. M. Norman
„	F. A. W. Purdy	„	Mrs. G. Rees
Councillor	W. C. Grove	„	C. E. Walker, M.B.E., M.A.
„	P. C. Hughes	„	Mrs. M. C. Wall
„	H. J. Mears (Junior)	„	F. H. Beale, M.A.

Other Members

L. J. J. Morgan, Esq.
 A. S. Ogden, Esq., M.B., Ch.B.
 A. A. F. Shepherd, Esq., L.R.C.P., L.R.C.S.
 C. Heygate Vernon, Esq., F.R.C.S.

PUBLIC HEALTH DEPARTMENT

Medical Officer of Health, Principal School Medical Officer, and Medical Referee to Cremation Authority	William Fielding, B.Sc., M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.H.
Deputy Medical Officer of Health, Deputy Principal School Medical Officer, Deputy Medical Referee to Cremation Authority ...	Eric Walter Wright, M.B., Ch.B., D.P.H.
Assistant Medical Officers of Health, School Medical Officers	C. R. Haines, M.B., Ch.B., D.R.C.O.G. F. A. Heimann, L.R.C.P., L.R.C.S., L.R.F.P.S., M.D.(Breslau) P. K. H. Keating, L.R.C.S.(I), L.R.C.P.(I), L.M., D.C.H. (One vacancy).
Principal Dental Officer	A. A. Wood, L.D.S., R.C.S.
Dental Officers	H. S. Hooper, B.D.S., L.D.S., R.C.S. F. E. Lockwood, B.D.S. (Univ. L'pool) (One vacancy).
Chief Public Health Inspector ...	William Riley, F.R.S.H. * † ° ‡
Deputy Chief Public Health Inspector	Jack Randall, M.R.S.H. + † ° ‡

District Public Health and Food Inspectors	H. R. Amrose+† W. G. Clarkson+† H. B. Frost+† A. J. Mortimer+† || S. M. Payne+† || S. Tweedie+†
District Public Health Inspectors	D. G. Lord,+ W. Vincent Morris,* S. Powell,* || Plus 5 Assistants.
Superintendent Health Visitor ...	E. M. Leahy.
Health Visitors	M. Ablett, K. H. Beaumont, D. J. Blackmore, D. E. Blundstone, P. M. Carey, F. Darlington, M. E. Davies, M. H. Dutton, M. J. Grosvenor, A. Johnson, A. D. Lane, B. Lead-bitter, G. M. Lunn, M. Manson-Bahr, A. Morton, J. Mulligan, M. Peakman, N. E. Smith, G. N. Suckamore, M. N. M. Tratsart, D. L. Vincent, J. Wilkinson (2 vacancies).
Municipal Midwives	H. J. Barrow, E. J. Frampton, L. Hawthorne, D. Hoare, B. McBride, E. M. Schoch, D. M. A. Sharp.
Superintendent, Home Nursing Service	F. Grindrod.
Senior Nurse, Home Nursing Service	E. Lane.
Home Nurses	M. Burnett, M. DaCosta, G. Draper, E. Finnemore, M. Fothergill, E. P. Gilbert, R. Guscott, M. Higgins, B. Jackson, M. Jones, T. M. Jones, M. Large, P. R. May, L. Mist, M. K. Mundy, E. Rampton, B. M. Rendle, C. Rimanoczy, V. A. Robbins, E. E. Souter, E. M. Stockbridge, G. H. Sutton, J. K. Tolley, D. E. Welch
Educational Psychologists ...	J. A. Cowell, B. W. Foxley
Senior Psychiatric Social Worker	H. S. Lovejoy
Psychiatric Social Worker ...	(1 vacancy)
Social Workers	E. Evans, G. M. Parr (one vacancy).
Mental Health Officers	F. H. Lewis, R. Smith. W. G. Clarkson, J. Oddy (both part-time).
Dental Surgery Assistants ...	H. Allen, D. M. Cox, F. R. Hickmott, B. D. M. Read
Chief Administrative Assistant and Chief Clerk	J. W. Roberts
Senior Administrative Assistant	H. V. Humberston
Secretary to Medical Officer of Health	Miss B. Tyrer
Section Clerks	F. J. Goode, C. Lockett, S. Murphy

Clerks	...	...	...	...	H. R. Bryan, K. F. Clarke, M. A. Cormack, D. M. Davey, P. Hawke, D. E. Jeans, M. McGovern, L. E. Moss, I. Murphy, J. Oddy, E. G. Payne, J. W. Peake, R. W. Rowe, B. Tarrant, S. G. Tarrant, J. I. M. White, N. Woods
Home Help Organiser	...	...			Mrs. L. A. Horwood
Ambulance Depot Superintendent					A. N. Platts
Training Centre	...	...			C. R. Ashley, Miss H. R. Copping (Supervisors), Mrs. J. C. Ellis, W. E. Fisher, Mrs. G. M. Nott, S. Nott, Miss J. F. Randall, Miss B. Skellern, Mrs. K. Starkie
Superintendent of Public Conveniences and Mortuary	...				W. C. R. Jewell
Rodent Officer	...	...	...		P. L. J. Sibley, plus 4 Operatives

PART-TIME OFFICERS

Senior Medical Officer for Mental Health	...	...	...	...	G. J. Bell, L.D.S., R.C.S., L.R.C.P.&S., M.B., B.S., D.P.M.
—Chest Physicians	...	...			W. H. Tattersall, M.A., M.D. A. C. Craig, B.Sc., M.B., Ch.B. A. T. Hendry, M.B., Ch.B., F.R.F.P.S.
—Consultant Children's Psychiatrist					J. E. Stirrat, M.B., Ch.B., D.P.M.
Public Analyst	...	...	...		F. A. Lyne, B.Sc., F.R.I.C.
Meteorological Registrar			...		A. J. Mortimer
Deputy Meteorological Registrars					C. Lockett, S. Tweedie
Dental Officers	...	...	...		M. B. Redfern, L.D.S. M. Gardener, L.D.S., R.C.S.

* Certificate of the R.San.I. for Sanitary Inspectors.

† Certificate of the R.San.I. for Inspectors of meat and other foods.

° Certificate of the R.San.I. for Smoke Inspectors.

+ Certificate of the R.San.I. and Sanitary Inspectors' Examination Joint Board.

‡ Certificate of the Examination Board of the Sanitary Inspectors Association (1921).

|| Certificate of the R.San.I. for Sanitary Science.

—Employed by Wessex Regional Hospital Board.

General Statistics

Area of the County Borough	...	...	...	11,627 acres
Estimated Civilian Population—Mid Year 1961				149,000
Provisional Census Population, 1961	...	...	...	153,965
Rateable Value at 1.4.61	...	...	...	£3,878,537
Product of 1d. rate, 1961/62	...	...	...	£15,921

Vital Statistics

Live births	{ Male Legitimate 798, Illegitimate 97 Female „ 750, „ 75 „ 90% „ 10% }	...	...	1720
Birth rate (per 1,000 population)	...	...	...	11.54
Stillbirths	{ Male Legitimate 6, Illegitimate 2 Female „ 12, „ Nil }	...	...	20
Stillbirth rate (per 1,000 total live and still births)	...	...	...	11.49
Total Deaths (Males 1112, Females 1311)	...	...	...	2423
Death Rate (per 1,000 population)	...	...	...	16.26
Adjusted Death Rate (per 1,000 population)	...	...	...	10.89
Maternal Deaths (Sepsis Nil, Other causes Nil)	...	...	...	Nil
Maternal Mortality Rate (per 1,000 total births)	...	...	...	Nil
Number of deaths of infants (under 1 year of age) :—				
Legitimate 36, Illegitimate 4	...	...	...	40
Infant Mortality Rate (per 1,000 live births)	...	...	...	23.26
(Legitimate 23.26, Illegitimate 23.26)				
Number of Neo-natal Deaths (under 4 weeks of age)	...	...	...	32
Neo-natal Mortality Rate (per 1,000 live births)	...	...	...	18.6
Number of Early Neo-natal Deaths (under 1 week of age)	...	...	...	29
Early Neo-natal Mortality Rate (per 1,000 live births)	...	...	...	16.86
Number of Perinatal Deaths (Stillbirths and deaths under 1 week of age)	...	...	...	49
Perinatal Mortality Rate (per 1,000 live and still births)	...	...	...	28.16
Deaths from Whooping Cough, all ages	...	...	...	1
Deaths from Measles, all ages	...	...	...	1
Deaths from Diarrhoea, under 1 year of age	...	...	...	Nil
Deaths from Pulmonary Tuberculosis (Males 4, Females 2)	...	...	...	6
Death rate from Pulmonary Tuberculosis (per 1,000 population)	...	...	...	0.04
Deaths from Non-Pulmonary Tuberculosis (Males 1, Females Nil)	...	...	...	1
Death rate from Non-pulmonary Tuberculosis (per 1,000 population)	...	...	...	0.007
Deaths from Cancer (Males 243, Females 217)	...	...	...	460
Death rate from Cancer (per 1,000 population)	...	...	...	3.09

Births

The number of live births allocated to the area after adjustment for inward and outward transfers was 1,720, an increase of 13 on the total for 1960.

Average number of births, 1951-1960	...	1,599
Births in 1961	...	1,720
Average birth rate, 1951-60	...	11.24 per 1,000 population
Birth rate, 1961	...	11.54 per 1,000 population
Birth-rate, England and Wales, 1961	...	17.4 per 1,000 population

Stillbirths

There were 20 stillbirths in 1961, a decrease of 4 on the previous year, and lower than the average for the last ten years. Fifteen of these occurred in hospital and five in domiciliary practice.

Average number of stillbirths, 1951-1960	33
Stillbirths in 1961	20
Average stillbirth rate, 1951-1960	20.46 per 1,000 total births
Stillbirth rate, 1961	11.49 per 1,000 total births
Stillbirth rate, England and Wales, 1961	18.7 per 1,000 total births

Illegitimate Births

Illegitimate births accounted for ten per cent. of the total births, considerably higher than the national figure (5.4 per cent. in 1960), and one of the highest ever recorded in the Borough.

It is still very difficult to determine what proportion of these unmarried mothers are local girls and became pregnant while living in Bournemouth. All that is known of many of them is that they lived here at the time of the confinement, and it seems to be common for young girls who have become pregnant to drift to London and holiday towns on the south coast where the maternity services are good and where they can lose their identities for a time in the transient population.

Average number of illegitimate births, 1951-1960	127
Illegitimate births during 1961	174

Prematurity

(i.e. babies weighing 5½ lbs. or less at birth, irrespective of the period of gestation).

During the year 130 premature births were notified, 7.6 per cent. of the total births, and 15 less than in 1960. The causes of

prematurity are still obscure, but the precarious hold on life possessed by these small babies has a direct bearing on the infant mortality rate, and nearly a half of all babies dying during 1961 before their first birthday were born prematurely.

	<i>Live</i>	<i>Stillborn</i>	<i>Total</i>
Born at home ...	12	1	13
Born in Hospital ...	107	5	112
Born in Nursing Homes	5	—	5
	124	6	130

Infant Mortality

During the year 40 infants died in the first year of life, compared with 39 in 1960. This corresponds with an infant mortality rate of 23.2 per 1,000 live births compared with 22.8 in 1960 and 20.9 in 1959. It further compared with the national average of 21.4 per 1,000 live births in 1961.

Twenty-nine of the 40 infants died before they were a week old ; 16 from prematurity, 4 from congenital abnormalities, 5 from birth injuries and complications, 2 from blood incompatibilities, one from pneumonia and one from asphyxia by suffocation.

Of the remaining 11 babies who survived the neonatal period, 7 died later from congenital deformities, 2 from pneumonia, one from meningitis and one from epilepsy.

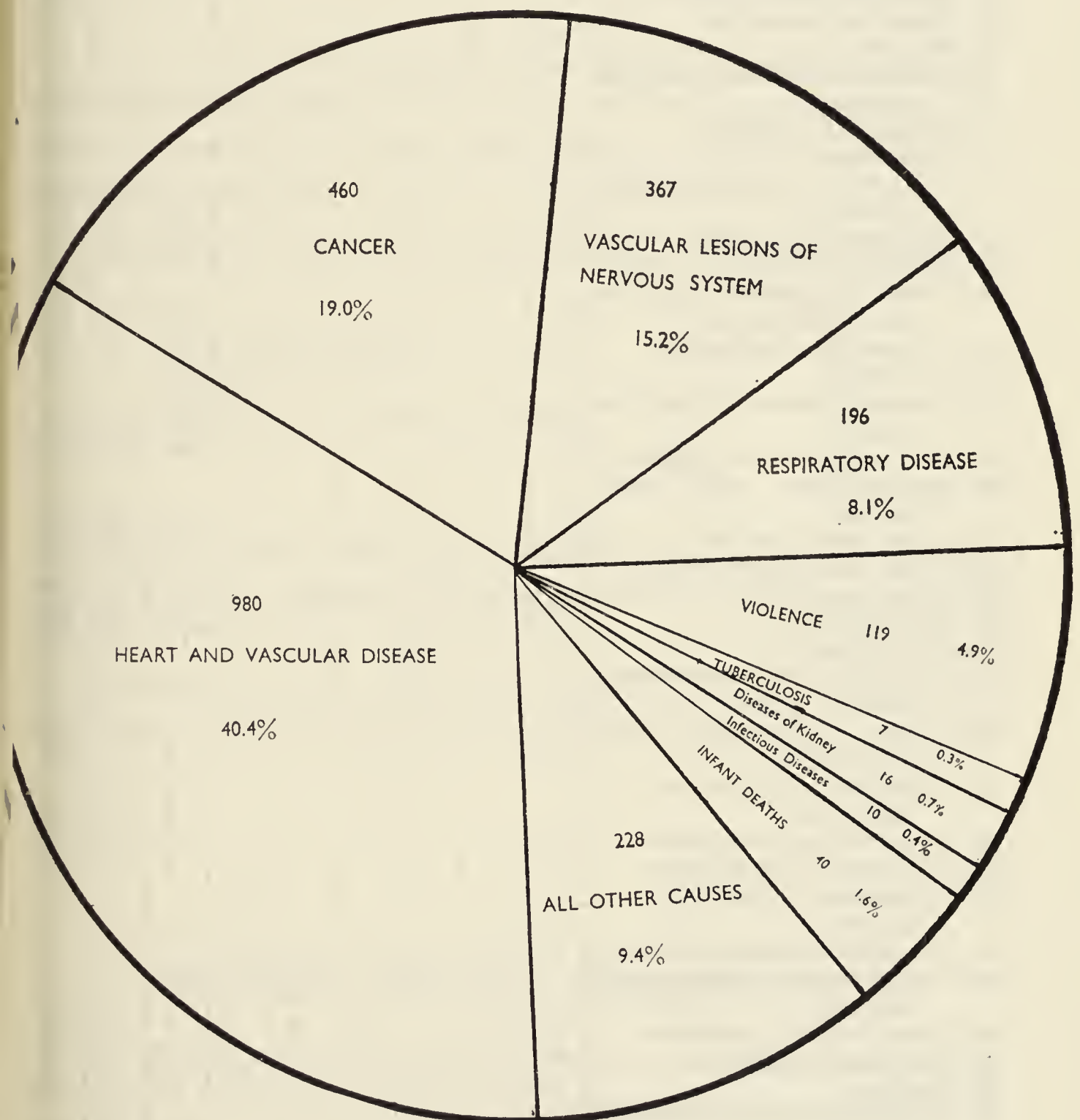
Maternal Mortality

For the third consecutive year, no Bournemouth mother died following childbirth.

Weight at Birth	PREMATURE LIVE BIRTHS												PREMATURE STILLBIRTHS		
	Born in Hospital			Born at home and nursed entirely at home			Born at home and transferred to Hospital on or before 28th day			Born in Nursing Home and nursed entirely there			Born in Nursing Home and transferred to Hospital on or before 28th day		
	Total	Died with- in 24 hours	Sur- vived 28 days	Total	Died with- in 24 hours	Sur- vived 28 days	Total	Died with- in 24 hours	Sur- vived 28 days	Total	Died with- in 24 hours	Sur- vived 28 days	Total	Died with- in 24 hours	Sur- vived 28 days
3lbs. 4oz. or less ...	11	7	2	—	—	—	—	—	—	—	—	—	—	—	—
Over 3lbs. 4oz. up to and including 4lb. 6oz.	26	4	20	1	—	—	—	—	—	—	—	—	1	—	1
Over 4lb. 6oz. up to and including 4lb. 15oz.	8	—	7	—	—	—	—	—	—	—	—	—	2	—	—
Over 4lb. 15oz. up to and including 5lb. 8oz.	62	1	59	11	—	11	—	—	—	4	—	4	—	—	—
TOTALS ...	107	12	88	12	—	11	—	—	—	4	—	4	1	—	1
													Born in Hospital	Born at Home	Born in Nursing Home

PROPORTION OF DEATHS FROM PRINCIPAL CAUSES, 1961.

Total Deaths, 2423



CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING THE YEAR 1961

Causes of Death	All Ages	0—	1—	5—	15—	25—	45—	65—	75—
All Causes	2423	40	3	6	12	38	409	619	1296
1—Tuberculosis, respiratory ...	6	...	...	...	...	1	2	...	3
2—Tuberculosis, other ...	1	...	...	...	...	...	...	1	...
3—Syphilitic disease ...	5	...	...	...	...	...	3	...	2
4—Diphtheria ...	...	...	...	...	...	...	...	...	...
5—Whooping Cough ...	1	1	...	...	...	...	...	...	...
6—Meningococcal infections ...	...	...	...	...	...	...	...	...	...
7—Acute poliomyelitis ...	1	...	...	...	...	1	...	...	...
8—Measles ...	1	...	...	...	...	1	...	...	...
9—Other infective and parasitic diseases ...	2	...	1	...	...	...	...	1	...
10—Malignant neoplasm stomach ...	49	...	...	...	...	...	10	21	18
11—Malignant neoplasm, lung, bronchus ...	114	...	...	...	...	1	45	49	19
12—Malignant neoplasm, breast	36	...	...	...	...	1	14	6	15
13—Malignant neoplasm, uterus	18	...	...	...	...	1	10	5	2
14—Other malignant and lym- phatic neoplasms ...	233	...	1	1	1	6	60	81	83
15—Leukaemia, aleukaemia ...	10	...	...	...	1	...	3	4	2
16—Diabetes ...	15	...	1	1	...	1	2	1	9
17—Vascular lesions of nervous system ...	367	...	...	...	...	1	35	79	252
18—Coronary disease, angina ...	472	...	...	...	...	3	96	158	215
19—Hypertension with heart disease ...	37	...	...	...	...	...	4	8	25
20—Other heart disease ...	373	...	...	...	...	1	21	58	293
21—Other circulatory disease ...	98	...	...	...	...	1	9	25	63
22—Influenza ...	21	...	...	...	...	1	3	6	11
23—Pneumonia ...	98	2	...	...	...	...	10	18	68
24—Bronchitis ...	75	...	...	...	...	1	16	22	36
25—Other diseases of respiratory system ...	23	...	...	...	...	...	9	5	9
26—Ulcer of stomach and duodenum ...	19	...	...	...	...	...	2	7	10
27—Gastritis, enteritis and diarrhoea ...	10	...	...	...	...	...	2	2	6
28—Nephritis and nephrosis ...	16	...	...	...	...	...	5	2	9
29—Hyperplasia of prostate ...	23	...	...	...	...	...	1	8	14
30—Pregnancy, childbirth, abortion ...	...	...	...	...	...	...	...	...	...
31—Congenital malformations	16	9	...	1	1	2	2	1	...
32—Other defined and ill-defined diseases ...	164	27	...	1	3	2	20	28	83
33—Motor vehicle accidents ...	30	...	...	1	4	7	7	2	9
34—All other accidents ...	65	1	...	1	1	3	6	15	38
35—Suicide ...	23	...	...	...	1	3	12	5	2
36—Homicide and operations of war ...	1	...	...	...	...	...	...	1	...

DEATHS FROM PRINCIPAL CAUSES, 1961

The accompanying diagram illustrates graphically the principal causes of death during 1961, and comparison with the statistics given in previous Annual Reports shows how little the pattern of mortality has changed during the last few years.

Diseases of the heart and arteries, vascular lesions of the nervous system, cancer and chronic respiratory disease were the chief causes of death, and between them accounted for nearly 83 per cent. of the total.

Deaths from coronary disease and "strokes" remained virtually unchanged from 1960, but deaths from non-tuberculous respiratory disease increased from 186 to 196. Deaths from pulmonary tuberculosis numbered six, compared with five in 1960.

Deaths from "violence" increased from 117 to 119, as follows :—

	1960	1961
Motor vehicle accidents	23	30
All other accidents	63	65
Suicide	30	23
Homicide and operations of war	1	1
	<hr/> 117	<hr/> 119

Of fatal motor vehicle accidents nine were in persons over the age of 75 years, compared with four in 1960, while in the case of suicides, 15 were in the age group 25-64 compared with 21 in 1960.

Over 79 per cent. of all deaths occurred in persons over the age of 65 years, and over 53 per cent. in persons over the age of 75 years.

Notifiable Infectious Diseases—1961

The Borough was relatively free from serious infectious disease during 1961, and there were no cases of poliomyelitis, diphtheria or typhoid fever.

There was one case of paratyphoid fever, in a young woman who was infected in Sydney, Australia, and ten cases of food

poisoning. Of these latter, five persons in one family were infected with *Salm. typhimurium*, and there were five isolated cases, four of them due to *Salm. typhimurium* and one to *Salm. heidelberg*.

Cases of measles were much more numerous than in 1960, 2,140 cases in all, while there were 81 cases of whooping cough and 18 cases of scarlet fever.

CASES OF INFECTIOUS DISEASE WHICH OCCURRED DURING 1961

Notifiable Disease	Number of Cases Notified							
	At Ages—Years							
	At all ages	Under 1 year	1 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and upwards
Scarlet Fever	18	—	4	12	1	1	—	—
Whooping Cough... ..	81	5	25	43	2	4	—	2
Acute Poliomyelitis—Paralytic	—	—	—	—	—	—	—	—
Non-Paralytic	—	—	—	—	—	—	—	—
Measles	2140	54	916	1138	21	9	2	—
Diphtheria	—	—	—	—	—	—	—	—
Acute Pneumonia	30	—	5	3	1	2	10	9
Dysentery	15	3	7	2	—	2	—	1
Paratyphoid Fever	1	—	—	—	1	—	—	—
Erysipelas	8	—	—	—	—	1	2	5
Meningococcal Infection	1	1	—	—	—	—	—	—
Food Poisoning	10	1	4	1	2	—	2	—
Puerperal Pyrexia	3	—	—	—	3	—	—	—
Ophthalmia Neonatorum	1	1	—	—	—	—	—	—
Scabies	7	—	1	1	1	4	—	—
Malaria	—	—	—	—	—	—	—	—
Acute Encephalitis	3	—	1	1	—	1	—	—

Tuberculosis in Bournemouth

During the year 37 cases of pulmonary and five cases of non-pulmonary tuberculosis were notified, the lowest total figure ever recorded in the Borough, and an extraordinarily fine achievement that reflects the greatest credit on the clinicians, epidemiologists and veterinary officers who have collaborated in the control of this disease.

There is a very close co-operation between the Chest Clinic and the Public Health Department, two health visitors being seconded for full-time duty at the Chest Clinic for out-patient sessions, contact and defaulter tracing and the investigation of the social conditions of patients.

The Deputy Medical Officer of Health has charge of the vaccination of schoolchildren against tuberculosis (B.C.G. vaccination) and the investigation of school child contacts of notified cases, and in assessing the need for rehousing on medical grounds, cases of active pulmonary tuberculosis are given the highest priority.

The notifications of new cases and deaths from tuberculosis since 1948 are shown in the accompanying table :—

			New cases		Deaths	
			Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
1948	...	...	118	16	67	6
1949	...	...	109	18	54	8
1950	...	...	80	11	46	1
1951	...	...	127	13	37	2
1952	...	...	141	17	33	5
1953	...	...	98	17	20	2
1954	...	...	136	16	28	—
1955	...	...	117	9	12	2
1956	...	...	107	9	14	4
1957	...	...	114	11	10	4
1958	...	...	110	10	11	1
1959	...	...	81	4	7	3
1960	...	...	66	9	5	1
1961	...	...	37	5	6	1

Notifications of pulmonary tuberculosis were 26 in males and 11 in females, the majority of the male cases being in the age group 55-plus.

Cases of non-pulmonary tuberculosis occurred as follows :—

Genito-urinary system (including kidneys)	2
Glands	1
Bones	1
Generalised miliary	1

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1952

Age periods (years)	Formal Notifications													
	Number of Primary Notifications of new cases of Tuberculosis													
	0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 and up- wards	Total (all ages)
Respiratory—														
Males ...	—	—	—	—	—	—	2	2	2	3	6	7	4	26
Females ...	—	—	—	1	—	2	—	1	3	2	1	1	—	11
Non-Respiratory—														
Males ...	—	—	—	—	—	—	1	—	1	—	—	1	—	3
Females ...	—	—	—	—	—	—	—	—	—	—	—	2	—	2

Particulars of new cases of Tuberculosis notified, and deaths from the disease of Bournemouth residents.

	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year ...	—	—	—	—	—	—	—	—
1–5 years ...	—	—	—	—	—	—	—	—
5–15 „ ...	—	1	—	—	—	—	—	—
15–25 „ ...	2	2	1	—	—	—	—	—
25–45 „ ...	4	4	1	—	—	1	—	—
45–65 „ ...	9	3	—	—	2	—	—	—
65–75 „ ...	7	1	1	2	—	—	1	—
75 and upwards	4	—	—	—	2	1	—	—
Totals	26	11	3	2	4	2	1	—

SECTION 172 OF THE PUBLIC HEALTH ACT, 1936 — RELATING TO THE COMPULSORY REMOVAL TO HOSPITAL OF PERSONS SUFFERING FROM TUBERCULOSIS

No action has been taken.

PUBLIC HEALTH (Prevention of Tuberculosis) REGULATIONS 1925 — RELATING TO PERSONS SUFFERING FROM TUBERCULOSIS IN THE MILK TRADE

No action has been required.

Arrangements at the Chest Clinic, Alumhurst Road, have remained largely unchanged, and a great deal of the credit for the very satisfactory position in Bournemouth must go to Dr. W. H. Tattersall, Consultant Chest Physician, and his staff.

Dr. J. Stuart Robertson, Medical Director of the Mass Radiography Unit, has provided the following information of the work carried out in Bournemouth.

Report by Dr. J. Stuart Robertson, Medical Director.

MASS RADIOGRAPHY

The work of the two Mass Radiography Units has continued much as on similar lines to previous years : the 35 mm. unit being engaged primarily in general public surveys throughout Dorset, Hampshire and Wiltshire, and the 100 mm. unit in the examination of general practitioner referral cases and surveys in small factories where it would not have been economic or practical to take the more cumbersome unit.

The incidence of active tuberculosis is declining rapidly but from our public health preventive standpoint and complete eradication of the disease it is even more important to root out all sources of possible infection. The incidence of cancer of the lung unfortunately continues to increase.

Our 100 mm. unit during the year was made available to the Borough for the X-Ray examination of staff for superannuation and pre-employment and by arranging this facility a considerable saving in Borough expenditure has been achieved.

Mass Radiography Surveys carried out in Bournemouth during 1961

35 mm. Unit.

			<i>Adults</i>		<i>Schoolchildren</i>		<i>Total</i>
			<i>Males</i>	<i>Females</i>	<i>Males</i>	<i>Females</i>	
Mass Radiography Centre							
(2.1.61 to 27.1.61)	...	...	1279	1419	4	9	2711
Max Factor	...	...	354	707			1061
Telephone House	...	...	448	126			574
P.O. Sorting Office	...	...	213	22			235
Kinson	...	...	494	810	10	8	1322
Ensburry Park	...	...	588	645	5	6	1244
Winton	...	...	688	1032	23	19	1762
Mass Radiography Centre							
(6.12.61 to 29.12.61)	...	...	487	426	3	6	922
			4551	5187	45	48	9831

100 mm. Unit.

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Lee Motors, Winton	111	10	121
Anglo-Continental School of English	178	149	327
Royal Victoria Hospitals, Boscombe and Bournemouth	94	319	413
Bournemouth College of Art	12	16	28
Hartwell Motors, Bournemouth	20	1	21
Telephone Exchange, Bournemouth	33	166	199
Malmesbury and Parsons Dairies	47	17	64
F. H. Bassett & Sons Ltd., Boscombe	17	47	64
Crown Chambers (Inland Revenue)	85	65	150
Marks & Spencer, Boscombe	3	37	40
	600	827	1427

An analysis of the results is as follows :—

No. X-rayed	1427
No. referred for investigation	9

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Tuberculosis, requiring domiciliary treatment	2	—	2
„ „ supervision	—	1	1
Non-tuberculous conditions	1	3	4
Not yet classified	1	1	2
	4	5	9

Maternity and Child Welfare

At the end of 1961 there were 16 Infant Welfare Centres in the Borough providing 21 clinic sessions weekly. Seven of the 16 Centres were in Corporation ownership, the remaining nine being rented from religious and other organisations on a sessional basis.

In theory, the Borough is very well provided with Infant Welfare Centres, and there are comparatively few areas where the Centre is an unreasonably long distance from the population it serves. In practice, however, the position is not quite so satisfactory, as only one of the seven Corporation-owned Centres has been built for the purpose, and in the rapidly growing fringe areas

of the Borough new Centres are required, either as replacements for totally unsuitable rented premises or to meet an entirely new demand. Some of these requirements have been included in the capital schemes already approved by the Council, and others are included in the Ten Year Development Plan still to be approved by the Ministry.

Total attendances at Infant Welfare Clinics were higher than in 1960, 47,989 compared with 43,994, while attendances of infants below the age of one year increased from 25,667 to 27,343. There is clearly a sustained demand for the services provided by the local health authority for pre-school children, which in many cases cannot be provided by general medical practitioners, and every effort is made to prevent any overlapping or conflict between two branches of the National Health Service who both have statutory obligations towards the same individuals.

ATTENDANCES AT INFANT WELFARE CENTRES, 1961

Clinic	Infants under 1 year	Pre- school Children	Total	Sessional Average
Avebury ...	1150	712	1862	37
Boscombe ...	1692	640	2332	45
Charminster ...	991	814	1805	35
East Howe ...	1237	1228	2465	48
Ensbury Park ...	1655	1076	2731	54
Iford ...	1300	1328	2628	51
Kinson ...	1745	1033	2778	53
Malmesbury Park	1953	1016	2969	57
Moordown ...	595	554	1149	37
Northbourne ...	1310	777	2087	43
Pokesdown (a.m.)	1419	934	2353	45
Pokesdown (p.m.)	1657	965	2622	51
Strouden ...	1213	1020	2233	43
Sutton Road ...	1282	1173	2455	48
Tuckton ...	1107	1179	2286	48
West Cliff ...	1168	685	1853	39
West Howe (a.m.)	777	1114	1891	37
West Howe (p.m.)	1157	1520	2677	51
Winton (a.m.) ...	1665	1028	2693	53
Winton (p.m.) ...	1775	1346	3121	61
Castle Lane ...	495	504	999	38
	27343	20646	47989	47

From 4th September, 1961, Moordown was held weekly instead of fortnightly.

Ultra Violet Light Clinics

A small number of children, 22 in all, made 174 attendances for ultra-violet light treatment at Malmesbury Park (Stewart Road) Clinic. A falling demand in the Kinson area led to the cessation of ultra-violet light facilities at East Howe Clinic.

Welfare Foods

The sale of welfare foods, which was transferred to local authorities by the Ministry of Food in 1954, has continued at all Infant Welfare Centres, and during 1961 showed the generally lower demand that has been experienced throughout the country. This reduced demand seems to be connected with the greater prosperity of the mothers of today, who prefer to pay the additional cost of the branded article.

	1955	1956	1957	1958	1959	1960	1961
National Dried Milk (tins) ...	44,505	43,268	31,861	26,288	24,073	20,584	15,801
Cod Liver Oil (bottles) ...	14,676	13,411	11,259	7,483	7,174	7,312	5,086
Vitamin A and D Tablets (packets)	5,652	6,166	5,982	6,151	6,447	7,270	5,275
Orange Juice (bottles)	79,387	85,834	87,977	58,708	57,763	55,599	35,083

From the 1st June, 1961, the price of orange juice was increased from 5d. to 1/6 a bottle, cod liver oil charged at 1/- a bottle and vitamin tablets at 6d. a packet, whereas previously they were both issued free.

Ante Natal Supervision

Following a period of steady decline, the attendances at the Ante Natal Clinic at Avebury (one session per week) increased from 426 to 441, and the numbers attending increased from 284 to 322.

Only a comparatively small number of mothers attend for full ante-natal supervision, the majority coming for blood examination only.

BIRTHS OCCURRING IN BOURNEMOUTH, 1961.

	1955		1956		1957		1958		1959		1960		1961
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.
Domiciliary Births	473	27.0	510	27.7	527	27.5	533	27.2	559	27.6	616	29.3	601
Institutional Births	1282	73.0	1334	72.3	1390	72.5	1425	72.8	1464	72.4	1484	70.7	1525
TOTALS	1755	100	1844	100	1917	100	1958	100	2023	100	2100	100	2126

During 1961 the following births were notified as occurring in the Borough :

Domiciliary births 601 (616)

Institutional births 1525 (1484)

Royal Victoria Hospital 836 (821)

Aston Grays Maternity Home 359 (401)

Firs Maternity Home (which opened in Sept., 1961) 91 (—)

Free Church Council Maternity Home 76 (68)

Private Nursing Homes 163 (194)

1525 (1484)

TOTAL 2126 (2100)

Figures in brackets indicate corresponding numbers for 1960.

This total is therefore 26 more than in 1960, there having been an increase of 41 in the number of institutional births and a decrease of 15 in the number of domiciliary births.

In addition 150 Bournemouth patients were delivered in the Hospital Management Committee's Maternity Home at Barton-on-Sea.

Infectious Diseases associated with Childbirth

3 cases of puerperal pyrexia and one of ophthalmia neonatorum were notified.

Family Planning

The Family Planning Association held weekly clinics at Avebury until 25th April, 1961, when the Association moved their Clinic to Stafford Road where they hold three sessions a week. The Local Authority made a grant in respect of 13 cases treated on medical grounds.

Nursery and Child Minders (Regulation) Act, 1948

Seven premises were registered under this Act, providing accommodation for 83 children, as follows :—

ADDRESS	No. and age of children accepted	HOURS OF OPENING
St. Ambrose Hall, Alumhurst Road	12 2-5 years	9.30 a.m. to 12.30 p.m.
"Clynch", 81 Glenferness Avenue	14 2-5 years	9.30 a.m. to 12.30 p.m. excepting school holidays
172 Seafield Road	4 2-5 years	9.0 a.m. to 4.0 p.m.
32 Branksome Wood Road	20 2-5 years	9.0 a.m. to 4.0 p.m.
Winton Congregational Church, Peters Hill	15 2-5 years	9.0 a.m. to 4.0 p.m.
195 Pine Road	6 2-5 years	9.30 a.m. to 12.30 p.m. and 2.30 p.m. to 4.30 p.m.
8 Warren Edge Road	12 2-5 years	9.15 a.m. to 12.15 p.m.

The standard required before registration follows as nearly as possible the Ministry recommendations for war-time Day Nurseries, which is the standard maintained in the Corporation Day Nursery at 10 Wellington Road. The Public Health Inspector and the Fire Prevention Officer advise on any matters requiring attention, and following registration the District Health Visitor pays regular visits, usually every one or two months.

Mother and Baby Homes

Financial grants were continued by the local authority to the two mother and baby homes maintained by voluntary organisations within the Borough. Twenty-two local girls were admitted to the Free Church Council Home at 11 St. Alban's Avenue compared with nineteen in 1960, and while eleven local girls were admitted to St. Thomas' Lodge, these were "shelter" cases only. Five of the girls were pregnant, but in no case was the stay longer than three weeks and the confinement was arranged elsewhere.

In addition, six Bournemouth girls were provided with accommodation outside the Borough, at the expense of the local authority, compared with nine in 1960.

Day Nursery

The Corporation Day Nursery at 10 Wellington Road had an average daily attendance of 29 babies and young children, compared with 29 in 1960 and 30 in 1959. Attendances during the peak holiday season filled the nursery to capacity, but throughout the year a high proportion of the children belonged to the "priority" class.

The fact that privately run Day Nurseries provided 83 places suggests that there is a fairly substantial demand, mainly by working mothers, for day minding. This demand, however, appears to be casual rather than sustained, and it would be difficult to justify increased local authority provision of Day Nurseries to meet a demand which appears to arise only during the summer months, and for non-priority cases.

There were no serious outbreaks of illness at the Day Nursery during the year, and all children received regular medical and dental inspections.

Dental Treatment for Mothers and Young Children, 1961

Report by A. A. Wood, L.D.S., Principal Dental Officer

General Observations

The three full-time and two part-time dental officers employed by the Bournemouth Local Authority each gave part of their time to the inspection and treatment of mothers and pre-school children. The dentists were also employed in the school dental service.

Our objective is to conserve the teeth whenever possible, and it is important that young children should be seen frequently so that dental decay can be dealt with and eradicated in its early stages. Every effort was made to obtain the confidence of young children and their parents in the hope that by giving careful and considerate treatment, together with advice to the parents on the care of the teeth, they would grow up with well cared for mouths and without fear of the dentist.

All patients were given the opportunity to have provided for them all the treatment needed to produce dental fitness.

Co-operation with other services

All mothers who attended the ante-natal clinic were told by the doctors of the importance of their dental condition, and those mothers who were not under the care of private dentists were referred to the clinics for examination, full treatment being offered when required.

We were fortunate in having the willing co-operation of the Health Visitors and School Nurses, who showed great interest in the work of dental health education. The efforts made were most valuable.

As in previous years the dentists visited the Infant Welfare Centres periodically, in order to give advice and carry out dental examinations. Forty sessions were spent in this way, which resulted in many young children having a pleasant introduction to regular dental supervision.

Royal Victoria Hospital, Boscombe

I would like to take this opportunity of expressing thanks to Mr. R. G. Torrens for his kindness in treating difficult cases which were referred to him during the year. This help was very much appreciated.

Facilities for X-rays

The X-ray unit at the Central Clinic, Madeira Road, again proved to be a very valuable aid in diagnosis on many occasions.

Provision of Dentures

Dentures were made by the highly skilled technicians at the Royal Victoria Hospital, Boscombe. The work was of a very high standard and the central position of the laboratory enabled the dental surgeons to pay occasional visits, when it was advantageous to give personal directions regarding the details of construction.

Visits to Day Nursery

The one remaining Day Nursery at 10 Wellington Road was visited twice during the year by Mrs. H. S. Hooper, one of our dental officers, in order to examine the children's teeth, and treatment was offered when required. The findings, which are included in the statistical part of this report, unfortunately show an increase in the average number of decayed teeth per child compared with the previous year. Enquiry showed that the infant, aged 2 years, referred to in the statistics with eighteen decayed teeth, had used a polythene feeding bottle. It may be useful to mention that whilst polythene for this purpose has obvious advantages it unfortunately often results in damage to the teeth, as the bottles are frequently filled with sweetened liquids or acid fruit juices, and infants tend to suck at them for long periods, whereas glass feeding bottles are usually used and then discarded until the next intake of nourishment.

Maternity and Child Welfare

(a) NUMBERS PROVIDED WITH DENTAL CARE

	Examined	Needing treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers ...	104	94	69	70
Children under five ...	964	377	231	234

(b) FORMS OF DENTAL TREATMENT PROVIDED

	Extractions	Anaesthetics		Fillings	Scalings or Scaling and gum treatment	Silver Nitrate treatment	Radio-graphs	Dentures provided	
		Local	General					Com-plete	Partial
Expectant and Nursing mothers	107	34	11	124	17	Nil	27	23	13
Children under five	94	8	50	482	Nil	90	23	Nil	Nil

TABLE SHOWING DENTAL CONDITION OF CHILDREN AT THE DAY NURSERY—Year 1961

Wellington Road

Age	Number Examined	Number Needing Treatment	Caries Free Teeth	Decayed Teeth	Filled Teeth	Missing Teeth	Total D.F.M.
2	6	1	89	18	—	—	18
3	13	1	253	7	—	—	7
4	13	3	252	5	3	—	8
Totals	32	5	594	30	3	—	33

The Domiciliary Services Provided by the Corporation

The domiciliary services of the Corporation, which have been under constantly increasing pressure since 1948, must inevitably be strengthened considerably if the local authority's Ten Year Plan, complementing the Hospital Plan, is to become a reality.

As is now evident from a consideration of the Hospital Plan, Regional Hospital Boards hope to provide by 1975 a modernised and streamlined hospital service which will concentrate on the active investigation and treatment of disease, and many cases of chronic sickness, where treatment can at best be palliative, will remain at home under the care of their own family doctors.

Such an arrangement can only hope to be successful if the facilities provided for home nursing are adequate, both in the material sense (sickroom equipment, clean linen service, etc.) and in the quality of service provided by home nurses, domestic helps, night-sitters, and social workers.

Patients nursed at home may not necessarily be cut off from the hospital, but they will attend for X-rays, pathological investigations, physiotherapy and investigations and treatments by consultants as out-patients, with a corresponding increase in transport requirements.

Of all the domiciliary services, whether of personnel or equipment, the domiciliary midwives in Bournemouth are probably alone in maintaining a service which should prove adequate in the foreseeable future. Although in this period of vast changes within the National Health Service it is unwise to be dogmatic regarding the sufficiency of any service, it seems likely that the increased provision of beds in general practitioner maternity homes, and the corresponding reduction in home confinements, will be offset by the early discharge of patients from maternity hospitals, with an increase of post-natal supervision and nursing.

Domiciliary Midwifery Service

Seven full-time midwives were directly employed by the Council at the end of the year. They attended 595 confinements (601 births), a decrease of 14 compared with 1960, and on average each midwife attended 85 confinements. This is, of course, a far higher number of confinements than the recommended maximum, and in addition there were 139 cases delivered in institutions and discharged home before the tenth day, who required post-natal nursing.

The opening of the Firs Maternity Home in September, 1960, was expected to make a substantial reduction in the number of domiciliary confinements in Bournemouth and East Dorset, but insofar as Bournemouth is concerned, the effect has so far been quite small. It is factors such as this, together with the speed of further hospital rebuilding in the Wessex area, that makes long-range forecasting such a hazardous business.

Domiciliary births represented 28.3 per cent. of the total births in the Borough, compared with 29.3 per cent. in 1960.

Details of domiciliary confinements were :—

Total No. of confine- ments	Primi- para	Multi- para	NO. OF PREVIOUS PREGNANCIES									
			1	2	3	4	5	6	7	8	9	10
595	106	489	200	148	66	41	17	11	4	2	—	—

AGE GROUPS						
15-20	20-25	25-30	30-35	35-40	40-45	45-50
40	176	199	120	50	10	—

Gas and air analgesia was given in 538 cases and pethidine in 373 cases.

MATERNITY CASES ATTENDED

Number of Deliveries attended by Midwives in the area during 1961.						
Domiciliary Cases						Cases in Instit- utions
Doctor notBooked		Doctor Booked		Totals		
Doctor present at time of delivery of child	Doctor not present at time of delivery of child	Doctor present at time of delivery of child either the booked doctor or another	Doctor not present at time of delivery of child			
(i) Midwives employed by the Authority	3	44	165	383	595	—
(ii) Midwives employed by Vol- untary Organisations :—						
(a) Under arrangements with the L.H.A. in pursuance of Section 23 of the National Health Service Act	—	—	—	—	—	—
(b) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act)	—	—	—	—	—	76
(iii) Midwives employed by Hospital Management Com- mittees or Boards of Gover- nors under the National Health Service Act	—	—	—	—	—	1261
(iv) Midwives in Private Practice (including Midwives employed in Nursing Homes) ...	—	—	—	—	—	163
TOTALS	3	44	165	383	595	1500

MEDICAL AID UNDER SECTION 14 (1) OF THE MIDWIVES' ACT, 1951

Number of cases in which medical aid was summoned during the year under Section 14 (1) of the Midwives Act, 1951, by a Midwife :—

(a) For Domiciliary cases :—									
(i) Where the Medical Practitioner had arranged to provide the patient with maternity medical services under the National Health Service									
(ii) Others									
Total									
(b) For cases in Institutions									

HEALTH VISITING

Year	Expectant Mothers		Children under 1 year of age		Children between the ages of 1 & 5	Other Cases	Visits to TB households inc. in "Other Cases"	Visits by tuberculosis visitors	Ineffective Visits made by H.Vs.
	First	Total	First	Total	Total Visits	Total Visits			
1950	743	1,314	1,674	7,687	12,810	5,360	—	—	—
1951	809	1,507	1,601	8,262	12,893	8,542	—	—	—
1952	858	1,457	1,598	8,357	11,350	6,190	—	—	—
1953	908	1,741	1,642	8,904	11,830	1,657	223	1,401	—
1954	1,100	1,991	1,592	9,080	11,460	1,869	190	1,607	—
1955	1,047	1,972	1,496	9,001	11,712	1,881	207	1,525	—
1956	1,117	2,166	1,483	8,615	12,136	2,705	279	1,297	3,986
1957	1,162	2,122	1,513	8,247	11,920	4,362	230	1,562	4,532
1958	1,156	1,963	1,645	8,007	11,349	4,494	221	1,532	4,488
1959	1,130	2,076	1,609	7,653	10,354	4,384	184	1,791	4,106
1960	1,114	2,070	1,609	6,823	8,307	5,635	124	1,877	3,590
1961	1,260	2,450	1,688	8,788	12,870	6,221	119	1,953	4,701

At the end of 1961 the staff of health visitors consisted of a Superintendent and 22 full-time health visitors (authorised establishment Superintendent and 24 at present), while 2 student health visitors were in training at Southampton University. Of this number, two health visitors were seconded for full-time duty at the Chest Clinic, and one health visitor spent all her time visiting elderly and aged persons, assessing the social circumstances of patients recommended for admission to chronic sick beds at Christchurch Hospital, and maintaining a close liaison with the Geriatric Consultant and Almoner.

The remaining health visitors were general purpose health visitors and school nurses, paying special attention to the needs of expectant mothers and young children ; the care of elderly people, particularly those living alone or in poor health ; schoolchildren ; problem families ; health education, and the prevention of illness generally among all ages of persons.

These health visitors were divided into four groups, working in four separate areas of the Borough, and under the supervision of a senior health visitor. Each group was responsible for the clinics, for the schools, and in fact all aspects of health visiting within its area. Depending on population, schools, and special problems, the number of health visitors in each area varied from four to seven, and while each senior health visitor was expected to deal with her own problems so far as possible, she could ask for mutual support from another area in emergency.

During the year a total of 32,282 interviews and visits were conducted by the health visitors, compared with 24,712 in 1960.

Liaison Arrangements

Liaison arrangements with the Children's and Geriatric Departments of hospitals in the Bournemouth and East Dorset Hospital Management Committee's area are particularly close. The Senior Paediatric Registrar has for many years taken charge of one of the local authority's Infant Welfare Clinics, and discussions on cases of difficulty are readily arranged. On the geriatric side, the special health visitor seconded for work among the aged examines the social conditions of all applicants for admission to chronic sick

beds, visits the geriatric wards at regular intervals, and is in close contact with the Consultant Geriatric Physician and the hospital almoner.

Infant Welfare Clinics

Two health visitors attended the majority of the 21 Infant Welfare Sessions held each week, discussing problems with the mothers, weighing the babies where necessary, and referring problems requiring further advice to the clinic doctor. Total attendances increased from 43,994 in 1960 to 47,989 in 1961, and there were particularly heavy attendances at Winton, West Howe, Pokesdown, Malmesbury Park, Kinson, Iford and Ensbury Park clinics. From September, 1961, Moordown Clinic was held weekly instead of fortnightly owing to the press of numbers.

The continued help of the ladies of the former Bournemouth Infant Welfare Voluntary Association has been greatly appreciated, although some of the older members have found it impossible to continue, and it has been difficult to find new volunteers in the developing areas.

Mothercraft Classes

Mothercraft classes have continued both as a senior school activity, and also for expectant mothers. The twelve series of classes held at Avebury and East Howe Clinics were attended by 330 mothers.

Relaxation Classes

Classes for expectant mothers were held at Avebury, Pelhams East Howe, Pokesdown and Strouden. There were, in all, 50 courses of 10 lecture/demonstrations each, attended by 489 mothers.

Fathercraft Classes

Nine classes for fathers, chiefly those embarking on parenthood for the first time, were held at Avebury, at which 58 fathers attended.

Visits to Elderly Persons and the Aged

During 1961, a total of 957 elderly and aged persons received 3,689 visits, compared with 994 persons visited in 1960. The number of persons visited at the request of the Hospital Management Committee regarding their suitability for admission to a chronic sick bed was 453.

A high proportion of these visits were made by the special geriatric health visitor, but the district health visitor has still a part to play within the confines of her own district, and in many cases the close liaison existing between the Home Nursing and Home Help Services, the National Assistance Board, and the W.V.S. Meals on Wheels Service brought some degree of comfort to patients who were temporarily unable to obtain admission to hospital.

Special Services for Elderly and Handicapped Persons

The laundry service provided drawsheets, mackintosh sheets, air rings and covers, in 60 cases, the laundering work being carried out, as before, by the Royal Victoria Hospital.

CHIROPODY CLINIC 1961

Number of sessions held	...	...	...	120
Number of persons treated	...	...	...	395
Number of treatments given	...	...	...	1,119

			<i>Total number of treatments given</i>	
Number of persons receiving	1 treatment	107	107	
"	2 treatments	89	178	
"	3 treatments	91	273	
"	4 treatments	68	272	
"	5 treatments	13	65	
"	6 treatments	10	60	
"	7 treatments	9	63	
"	8 treatments	2	16	
"	9 treatments	1	9	
"	11 treatments	1	11	
"	14 treatments	2	28	
"	17 treatments	1	17	
"	20 treatments	1	20	
			395	1,119

Problem Families

Although many families are described as "problem families" and in fact fall into difficulties due to their own inadequacy, persistent attention by the health visitor aided by other statutory and voluntary services can often effect some improvement.

There is, however, a hard core of problem families, numbering perhaps not more than a few dozen, who are the despair of every agency attempting to help them. Days, weeks or years may be spent in the effort, and as often as not there is little tangible result. Generation succeeds generation, each contributing its quota of delinquents, criminals, prostitutes and psychopaths.

It is only right that the health visitor should attempt to help these families, for success or failure are often relative and it is often an achievement to maintain the status quo.

But it is often tempting to speculate on what might have happened if all this time and effort had been expended in a worthier cause, among families more capable of profiting by help and guidance.

It is highly important that in such time-consuming work, there should be no overlapping by agencies carrying out broadly similar duties, and the Family Case Committee, meeting on nine occasions in 1961, made the discussion of cases and the allocation of visiting one of its main functions. Nine new and seventeen other cases were considered.

Health Education

Health Education has continued on the lines of previous reports, the health visitors making their main impact through informal discussions in Infant Welfare Centres, schools, and in the course of their visits.

Formal talks and discussions with groups of interested people, usually women's organisations, were given on sixteen occasions, but in general group or class discussions seem less effective than the individual approach, unless the groups are very small.

A meeting has been held with the Head Teachers' Association to discuss ways and means of disseminating the information

regarding smoking and health to schoolchildren in an effective manner. This is a particularly difficult subject for health education, as the co-operation of the child's parents is so frequently lacking. In some cases parents even provide active encouragement towards the development of the smoking habit, and clearly this is a subject where a personal approach to both child and parent is necessary.

The use of posters, and other mass propaganda methods, would appear to be of limited value in an anti-smoking campaign, as has been found in relation to other diseases.

THE HOME NURSING SERVICE

The establishment of home nurses consisted of a Superintendent, a Senior Nurse and 24 home nurses at the end of 1961, and during the year 78,713 visits were made. This compares with the 76,031 visits made in 1960, and the calls on the home nursing service seem likely to increase very considerably when the Hospital Plan comes into operation. At the present time nearly 70 per cent. of all visits are to elderly and aged people and the reorganisation of the hospital service must inevitably increase still further the proportion of visits to the aged and chronic sick.

It is difficult, even at this stage, to meet the demands made on the home nursing service unless the establishment of nurses is completely filled, and a drastic revision and upgrading of the establishment to meet the needs of the future is urgently required.

New Patients attended during 1961

In all, 3,414 patients were served during the year, of whom 2,658 were new cases, made up as follows :

<i>Complaint</i>						<i>No. of Cases</i>
Tuberculosis ... ..	...	...	...	...	...	59
Respiratory system (other than T.B.) ... ..	...	...	...	...	...	223
Heart and Circulatory system ... ..	...	...	...	...	...	410
Digestive system ... ..	...	...	...	...	...	391
Reproductive system ... ..	...	...	...	...	...	76
Nervous system ... ..	...	...	...	...	...	253
Urinary system ... ..	...	...	...	...	...	117
Cancer ... ..	...	...	...	...	...	242
Diabetes ... ..	...	...	...	...	...	76
Injuries, burns, etc. ... ..	...	...	...	...	...	94
Senility ... ..	...	...	...	...	...	157
Rheumatism ... ..	...	...	...	...	...	97
Leg Ulcers and Skin conditions ... ..	...	...	...	...	...	173
Ear, Nose and Throat conditions ... ..	...	...	...	...	...	12
Preparation for hospital treatment ... ..	...	...	...	...	...	254
Miscellaneous conditions ... ..	...	...	...	...	...	24
						<hr/> 2658 <hr/>

The age distribution of all patients treated in 1961 was :

		<i>Patients nursed</i>			
		<i>Male</i>	<i>Female</i>	<i>Total</i>	<i>Percentage</i>
0- 4 years	...	13	9	22	0.64
5-14 years	...	22	18	40	1.17
15-24 years	...	22	50	72	2.11
25-44 years	...	76	169	245	7.18
45-64 years	...	246	536	782	22.91
65-74 years	...	315	599	914	26.77
75- years	...	406	933	1339	39.22
		1100	2314	3414	100.00

Sources of referral of new cases in 1961 were :

General Practitioners ... ..	...	...	...	...	1676
Hospitals ... ..	...	...	...	...	723
Personal application ... ..	...	...	...	...	193
Voluntary agencies ... ..	...	...	...	...	9
Health Department and Chest Clinic ... ..	...	...	...	...	57
					<hr/> 2,658 <hr/>

During the year, 2,648 cases were removed from the register owing to :

Admission to hospital ... ..	...	...	...	...	507
Died ... ..	...	...	...	...	291
Satisfactory outcome of case ... ..	...	...	...	...	1,850
					<hr/> 2,648 <hr/>

The Nursing of Sick Children

Less than 1.8 per cent. of patients nursed during 1961 were below the age of 14 years, chiefly for complications of infectious disease and minor medical and surgical conditions. Home nurses attended child patients on their own districts and no special arrangements were necessary.

The Treatment of Visitors

Requests for the continuation of special treatments were received on 195 occasions, and 1,700 visits were made to visitors in hotels, boarding houses and private holiday accommodation.

Injection Therapy

During the year, 29,478 injections were given to 1,126 patients, of which 7,795 were insulin injections.

Daily injections were necessary for 332 patients, and 71 patients received injections twice a day.

Late Visits

The number of visits made between 8.0 p.m. and 8.0 a.m. increased from 191 in 1960 to 531 in 1961, and were carried out by the home nurse on whose district the request arose.

At the end of the year 766 cases remained under treatment, receiving visits as follows :

<i>Twice Daily</i>	<i>Daily</i>	<i>Alternate days</i>	<i>Twice weekly</i>	<i>Thrice weekly</i>	<i>Weekly</i>	<i>Fort- nightly</i>	<i>Monthly</i>
10	89	30	118	58	252	107	102

A summary of the year's work and a comparison with previous years, was as follows :

	1954	1955	1956	1957	1958	1959	1960	1961
Number of patients on the Register, 1st Jan.	550	651	723	720	777	761	679	756
Number of new patients attended	3174	3407	3269	3249	3054	2763	2724	2658
Total number of patients attended ...	3724	4058	3992	3969	3831	3524	3403	3414
Number remaining on the Register on 31st December	651	723	720	777	761	679	756	766
Number of Patients taken off the Register	3073	3335	3272	3192	3070	2845	2647	2648
Total number of nursing visits	74,595	83,388	80,590	83,610	80,239	76,086	76,031	78,713

The illnesses of patients were classified as follows :

	1954	1955	1956	1957	1958	1959	1960	1961
Tuberculosis ...	70	89	126	146	139	107	93	86
Pneumonia	66	88	95	68	58	47	38	42
Miscarriages, etc. ...	8	—	6	18	26	18	24	16
Surgical	549	684	656	427	447	437	394	494
Medical	3017	3150	3098	3271	3136	2892	2830	2748
Infectious diseases ...	14	47	11	39	25	23	24	28
	3724	4058	3992	3969	3831	3524	3403	3414

DOMESTIC HELP SERVICE

The domestic help service consisted in 1961 of a full-time Organiser, one full-time and 89 part-time workers, giving an equivalent of nearly 95,000 hours to 1,362 applicants for help.

As will be noted from the summary, almost 70 per cent. of cases were among the aged population, a figure almost identical with the amount of help given to the same category of persons by the home nurses. Many of the people concerned receive help from both these agencies and, in fact, from health visitors as well, and in considering the development of the Council's domiciliary services, it seems important to appreciate that when elderly people finally reach the stage of requiring help, they often need it in variety and in quantity.

SUMMARY OF CASES HELPED

<i>Type of Case</i>	<i>Number</i>	<i>Hours spent</i>	<i>Percentage of Total Hours</i>	<i>Average hours per case</i>
Old age	904	65,597	69.4	72.6
Illness	351	24,648	26.1	70.2
Tuberculosis	20	1,200	1.3	60.0
Confinements	56	1,583	1.7	28.3
Mental Deficiency	10	1,013	1.1	101.3
Maternity and Child Welfare	20	362	} 0.4	18.1
Problem Family	1	24		24.0
TOTALS	1,362	94,427	100.0	69.3

Classification of cases served (by ages).

Under 15 years	...	...	20	1.5%
15-64 years	...	...	319	23.4%
65 years and over	...	...	1023	75.1%
			1362	100.0%

Ambulance Service

The ambulance arrangements in 1961 remained unchanged, being a combination of services directly provided by the Council, an agency arrangement with the St. John Ambulance Association, and the supplementary use of the Hospital Car Service. In addition, long journeys have been carried out as far as possible through British Railways, the patient being transported to the station by hospital car or ambulance service, and met by a similar arrangement at the station nearest his destination.

During 1961, the number of patients carried by the combined ambulance service increased from 59,468 to 62,521, and the mileage covered from 280,830 to 298,566. All sections of the service shared in this increase.

**TABLE SHOWING PATIENTS CARRIED AND MILEAGES COVERED BY
AMBULANCE SERVICE SINCE 1949**

Year	Local Authority		St. John Association		Hospital Car Service		Total	
	Patients	Mileage	Patients	Mileage	Patients	Mileage	Patients	Mileage
1949	7,990	82,824	1,736	30,513	7,141	89,997	16,867	203,334
1950	11,937	100,634	2,545	31,325	7,438	82,431	21,920	214,390
1951	12,335	103,192	2,973	25,401	13,132	82,467	28,440	211,060
1952	15,340	110,424	3,160	21,391	15,639	71,425	34,139	203,240
1953	18,782	127,334	2,159	13,619	17,446	73,258	38,387	214,211
1954	20,683	127,975	268	1,228	17,353	71,456	38,304	200,659
1955	23,104	142,991	163	1,131	18,241	69,740	41,508	213,862
1956	27,409	148,584	271	1,430	18,006	72,625	45,686	222,639
1957	30,736	159,511	427	1,487	17,257	70,866	48,420	231,864
1958	31,037	157,235	557	1,264	18,441	82,911	50,035	241,410
1959	35,030	170,938	572	1,777	19,494	89,526	55,096	262,241
1960	35,275	171,315	3,808	13,295	20,385	96,220	59,468	280,830
1961	36,196	173,192	4,639	15,856	21,686	109,518	62,521	298,566

There have been occasions when the resources of the ambulance service have been strained to the limit and beyond, and it must be remembered that the great majority of journeys undertaken are not emergencies such as street accidents, but are routine commonplace journeys carrying patients to hospital for admission from the waiting list, out-patient consultations or some form of prearranged treatment.

In other words, the ambulance service is more than anything else an adjunct to the hospital service, and depending upon the co-operation between hospital and ambulance administration it will discharge its services well or ill.

A good deal of thought has been given to the question of reducing unnecessary ambulance journeys, not only as regards "fruitless journeys", but also the use of ambulances by persons well able to use public transport. To this end, a number of meetings have been held with officials of the Royal Victoria Hospital.

Radio control has continued to play a major part in reducing the mileage covered per patient, and it is commonplace for an ambulance and crew to be away from the Depot for their whole tour of duty, being directed from one calling place to another through the radio transmitter at Portchester Road.

Year	<i>Average miles covered per patient carried</i>			
	<i>Local Authority</i>	<i>St. John Association</i>	<i>Hospital Car Service</i>	<i>Total all Services</i>
1949	10.36	17.57	12.60	12.05
1950	8.43	12.31	11.08	9.77
1951	8.36	8.53	6.27	7.42
1952	7.19	6.76	4.56	5.95
1953	6.78	6.30	4.19	5.58
1954	6.18	4.58	4.11	5.23
1955	6.18	6.94	3.82	5.15
1956	5.42	5.28	4.03	4.87
1957	5.19	3.48	4.11	4.79
1958	5.07	2.27	4.50	4.82
1959	4.88	3.11	4.59	4.76
1960	4.85	3.49	4.72	4.72
1961	4.78	3.42	5.05	4.78

At the end of the year, the Corporation fleet consisted of 8 ambulances and 4 dual-purpose vehicles, maintained by a staff of a Superintendent, Deputy, 26 driver/attendants and one clerk.

A 24-hour service was maintained.

THE WORK DONE BY THE SERVICE DURING 1961 IS SHOWN IN THE FOLLOWING TABLE

Service	Vehicles (Number at 31.12.61)	Patient Carrying Journeys	Patients Carried		Abortive and Service Journeys	Transport of Analgesia Apparatus, Midwives, etc.	Total Mileages	Transport by Rail		No. of Staff at 31.12.61
			Accident or Emergency	Other				No.	Rail Miles	
Directly provided St. John Assn. Hospital Car Service	Ambulances (8)	4,673	1,909	20,754	446	24	118,522	92	13,152	} 28 2 —
	Dual purpose (4)	1,961 366	197 108	13,336 4,531	237 22	76 —	54,670 15,856	147 —	21,330 —	
		6,364	—	21,686	57	—	109,518	—	—	
		13,364	2,214	60,307	762	100	298,566	239	34,482	30

Vaccination and Immunisation

Protection against smallpox, diphtheria, whooping cough and poliomyelitis continued through the year under schemes approved by the Ministry, and practitioners co-operated in carrying out the work.

Vaccination against Smallpox

2,235 persons received protection against smallpox, 1,531 by general practitioners and 704 in the local authority clinics. The total included 1,109 infants under the age of one year, or 49.6 per cent.

Immunisation against Diphtheria

A total of 154 children received protection against diphtheria (44 by general practitioners and 110 at infant welfare clinics) and in addition 2,524 children received "booster" doses (273 by general practitioners, 2,251 at local authority clinics).

Details follow :

Number of Children in the Local Health Authority area on 31st December, 1961, who have completed a course of diphtheria immunisation at any time between 1st January, 1946, and 31st December, 1961.

Age on 31.12.1961 (i.e., born in year)	Under 1 1961	1-4 1957-1960	5-9 1952-1956	10-14 1947-1951	Under 15 Total
A. Number of children whose last course (primary or booster) was completed in the period 1957-1961	721	4,909	4,968	1,541	12,139
B. Number of children whose last course (primary or booster) was completed in the period 1956 or earlier	—	—	2,132	6,452	8,584
C. Estimated mid-year child population	1,660	6,340	18,200		26,200
Immunity Index 100 A/C	43.4	77.4	35.8		46.3

Note.—The Immunity Index is the number of children immunised (primary or booster) during the last five years (total of item A) expressed as a percentage of the total estimated mid-year child population (total of item C), excluding any children who have passed out of the age group on 31st December, 1961, and any who are known to have died or left the area.

Immunisation against Whooping Cough

Six children were protected against whooping cough, all by general practitioners.

Use of Combined Antigens

Forty-seven children (23 primary injections and 24 "boosters") received protection against both diphtheria and whooping cough, and 2,298 (1,784 primary injections and 514 "boosters") against diphtheria, whooping cough and tetanus. These preparations were used by both general practitioners and in the infant welfare centres, and children receiving protection against diphtheria in this way were included in the table above.

Vaccination against Poliomyelitis

During 1961, 4,894 persons completed two injections, 4,691 third injections, and 8,130 fourth injections were given.

Details of the complete vaccination programme from its commencement in 1956 to the end of 1961 are as follows :

Persons who have received four injections	8,130
Persons who have received three injections	32,218
Persons who have received two injections	6,209

i.e., a total of 141,592 injections given to 46,557 persons

<i>Age group</i>	<i>Fourth injection</i>	<i>Third injection</i>	<i>Second injection</i>
1943/1961	... 8,130	16,679	3,092
1933/1942	... —	9,417	1,989
1920/1932	... —	4,665	440
Others	... —	1,457	688
	8,130	32,218	6,209
		46,557 persons	

Prevention of Illness—Care and After Care

Arrangements in force during the year included :

(1) Tuberculosis

(a) The seconding of two health visitors for full-time duty at the Chest Clinic and in domiciliary visiting of tuberculous patients.

(b) The payment of a proportion of the salary of the almoner and occupational therapist employed at the Chest Clinic.

(c) Boarding out of child contacts.

(d) Assistance in rehousing tuberculous patients by recommendation to the Housing Committee. During the year 5 cases were rehoused.

(e) Provision of nursing requisites.

(f) Provision of domestic help, 20 patients receiving 1,200 hours service.

(g) Rehabilitation of selected cases, one case being maintained at Papworth Hall.

(h) A grant to the Bournemouth Voluntary Tuberculosis Care Committee in respect of their work in providing cash payments, extra nourishment, bedding, coal and other items for tuberculous patients and their families.

(i) Occupational therapy for domiciliary patients, 58 cases receiving 882 visits during the year.

(2) Venereal Diseases

A health visitor attended the special clinic at the Royal Victoria Hospital.

(3) Illness generally

Provision was made at rest homes for the convalescence of patients recommended by general practitioners or hospital consultants. During the year 28 persons received recuperative holidays compared with 32 in 1960. The cost to the patient was based on

income, but the majority of beneficiaries under the scheme paid little if anything. All patients who had been away in rest homes were visited on their return home by a health visitor, and almost invariably had benefited considerably in health.

Articles of sick room equipment were issued on loan as required at the request of General Practitioners or hospitals. Nearly 650 articles were in use during the year, those in most frequent demand being mackintosh sheets (110), bed pans (92), commodes (89), wheel chairs (76), urinals (66), bed rings (51).

Mental Health Services

Since the inception of the Mental Health Act, 1959, considerable attention has been given to planning a comprehensive mental health service which would provide adequate facilities for all types of mental disorder, in persons of all ages.

The scope of this service must be such that it includes the prevention of mental breakdown, care and after-care, training and rehabilitation, and the provision of residential hostels, but excludes treatment of a kind that only a hospital can provide.

The prevention of mental disorder is a problem that has exercised some of the world's best intellects for a considerable time, and interesting discoveries have been made recently which lead to the hope that before long some real headway may be made. Until that time we must employ what knowledge we already possess, the knowledge that certain matings are undesirable because of the possibility of producing subnormal offspring; that certain virus

diseases, e.g. rubella, affecting the mother during the first three months of pregnancy, may cause mental subnormality or deformity in the child ; that prematurity may be a cause of both physical and mental weaknesses ; and that certain metabolic conditions, as thyroid deficiency or phenylketonuria, may be detected early enough in an infant's life for remedial action to be taken and mental subnormality prevented.

In the field of mental illness, we know that the personality of an individual may undergo morbid changes leading to the onset of psychosis, and our chief efforts are directed towards the early detection of illness when treatment can be expected to bring improvement or cure.

The family doctor, the patient's relatives, workmates, the health visitor, educational psychologist or social worker all have varying opportunities of noting those departures from the normal which may presage the onset of mental illness, and the greater their experience the earlier treatment is likely to be commenced.

Hospital treatment is frequently only symptomatic, and although leading to considerable improvement in many cases, relapses are only too common, and of all patients admitted to mental hospitals during 1961, over 35 per cent. had been previously treated in hospital for mental illness.

It is the function of the after-care service to take charge of the discharged patient, and through its social workers to provide support and stability to personalities and situations that are still a little off-balance. Only in this way, it would seem, can many discharged patients ever hope to rehabilitate themselves and regain their place in society, and this applies particularly to those living alone, or lacking the sympathy and support of near relatives.

Admissions to Mental Hospitals, 1961

The total admissions to mental hospitals, 450 in 1961, were 13 per cent. higher than in 1960, and the highest ever recorded in

Bournemouth. Of these, 146, or 32 per cent., were informal (voluntary) admissions, the remainder being compulsory admissions for, in the main, observation purposes.

TABLE I.

ADMISSIONS TO MENTAL HOSPITALS DURING LAST 7 YEARS

<i>Year</i>	<i>N.D.</i>	<i>V.</i>	<i>T.</i>	<i>Section 11</i>	<i>Section 14, etc.</i>	<i>Section 20</i>	<i>Total</i>
1955	11	166	10	2	95	42	326
1956	103	80	15	8	98	47	351
1957	98	92	12	6	77	76	361
1958	118	63	16	6	72	103	378
1959	119	28	4	3	18	201	373
1960 1.1.60— 31.10.60	125	—	—	—	10	196	331*
	<i>Inf.</i>		<i>Sect. 60</i>	<i>Mental Sect. 29</i>	<i>Health Sect. 26</i>	<i>Act Sect. 25</i>	39
1960 1.11.60— 31.12.60	28			6	4	24	
1961	146		i	111	17	175	450

* The new Mental Health Act, 1959, came into operation on 1st November 1960.

It will be noted by reference to Table II that admissions were spread throughout the entire age range, 10 - 80 plus, and that in the decades between 30 - 80 years there were no extreme variations in the numbers admitted to hospital. Although the aged have their share of mental illnesses, often due to senile cerebro-vascular disease, it is among the earlier age groups that the bulk of admissions are to be found, the depressions, schizophrenics and anxiety states.

TABLE II
ALL PATIENTS ADMITTED TO HOSPITAL DURING 1961
Under Mental Health Act

<i>Age Group</i>	<i>Males</i>				<i>Females</i>					<i>Total</i>
	<i>Inf.</i>	<i>Sect. 26</i>	<i>Sect. 25</i>	<i>Sect. 29</i>	<i>Inf.</i>	<i>Sect. 26</i>	<i>Sect. 25</i>	<i>Sect. 29</i>	<i>Sect. 60</i>	
10-20	4	—	1	—	2	—	2	1	—	10
20-30	9	—	4	5	7	2	3	10	—	40
30-40	10	1	8	10	23	2	12	14	—	80
40-50	8	3	6	11	18	2	11	8	—	67
50-60	12	2	9	4	17	1	18	14	1	78
60-70	3	—	10	4	22	4	25	14	—	82
70-80	3	—	16	2	6	—	25	8	—	60
80+	—	—	4	2	2	—	21	4	—	33
	49	6	58	38	97	11	117	73	1	450

Table III shows the great value of a period of observation in a mental hospital, even though such observation had originally to be on a compulsory basis. Of 286 (63.6 per cent. of the 450 cases) admitted under Section 25 or 29 of the Mental Health Act, 1959, only nine cases were retained in hospital for further treatment on a compulsory basis, while no fewer than 268 either became informal patients or were discharged.

TABLE III
PATIENTS ADMITTED UNDER SECTIONS 25 and 29 OF MENTAL HEALTH ACT, during 1961

<i>Subsequent history of patient</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Died in Hospital	3	6	9
Admitted for treatment (Sect. 26, M.H. Act)	2	7	9
Became Informal Patients	65	149	214
Discharged	26	28	54
Totals	96	190	286

As mentioned earlier, modern treatment tends to be symptomatic by electro-convulsive therapy, tranquillising drugs, and other similar methods, which frequently lead to a fairly rapid improvement which may leave the underlying psychosis untouched. It is possibly only by such short-term treatments that the bed state of a hospital can be kept fluid enough to admit the many patients who need admission, and in any event, it would be difficult, if not impossible, for a hospital to retain a patient for further treatment who had improved sufficiently to be discharged.

This policy of short-term admissions seems inevitably to lead to a flood of relapses and readmissions, as is well shown by Table IV.

TABLE IV
RE-ADMISSIONS TO MENTAL HOSPITALS

1957	Total admissions	361	Re-admissions	115	Percentage	31.8%
1958	„	378	„	120	„	31.7%
1959	„	373	„	131	„	35.1%
1960	„	393	„	140	„	35.6%
1961	„	450	„	160	„	35.6%

The value of social work in the after-care of mental illness

The main hope in limiting the relapse rate in discharged patients appears to be an effective service of social workers combined with adequate psychiatric out-patient care, the family doctor acting as the link between these services.

There are at present far too few social workers to be fully effective, but the analysis of 100 cases, followed up over a year, made by Mr. H. S. Lovejoy, Senior Psychiatric Social Worker, is of considerable interest.

A critical appraisal of the value of casework in preventing further breakdown showed :

Category A :	Casework clearly effective	...	32 cases
Category B :	Casework partially effective	...	45 cases
Category C :	Effect difficult to assess	...	23 cases
			100 cases

TABLE V

<i>Name</i>	<i>Status</i>	<i>Age</i>	<i>Diagnosis</i>	<i>Prognosis</i>	<i>Hospital re-admis. over the period</i>	<i>Nature of social difficulty</i>	<i>Assessment of contribution of case work after care in preventing further breakdown</i>	
R.P.	W	63	Reactive depression.	Fair	0	Unsettled since death of wife.	Close contact with doctor and psychiatrist for early treatment when he breaks down. Regular weekly visits, daily when breaking down.	A
R.E.	S	45	Anxiety phobia neurosis.	None given	1	No apparent social problems.	Occasional supportive visits. Encouraged to work in house and to go to choir practice, etc. Re-admission was occasioned by mother's illness.	C
J.F.	Septd.	47	Paranoid schizophrenic	Guarded	0	Husband living with another woman. Patient living with mother and elderly aunt. Poor physical health.	Supportive visits. Placed on housing list. Encouraged to help more in house and go out more.	C
O.F.	M	44	Paranoid schizophrenic	None given	0	Loneliness. Poor physical health.	Encouraged to join clubs, etc. Occasional supportive visits.	C
A.G.	S	56	Depression and cardiac trouble	Fairly good	0	Loneliness and poor physical health.	Helped to obtain room. Arranged O.T., encouraged to obtain job. Supportive visits since relapse of physical health.	B

<i>Name</i>	<i>Status</i>	<i>Age</i>	<i>Diagnosis</i>	<i>Prognosis</i>	<i>Hospital re-admis. over the period</i>	<i>Nature of social difficulty</i>	<i>Assessment of contribution of case work after care in preventing further breakdown</i>	
N.G.	M	41	Anxiety hysteria	Guarded	0	Marital stress and difficult social relationships. Inadequate and immature personality.	Supportive visits. Discussions re marital and social problems. Visits increased during times of stress.	B
H.O'S	M	45	Reactive depression	Fair	1	Marital stress. Two sons in Borstal. Inadequate personality.	Frequent supportive visits. Close contact with Probation Officer. Report to Court and contact with Borstal Chaplain.	A
K.H.	M	43	Chronic alcoholism in an hysterical psychopath	Very poor	1	Social difficulties arise as consequence of drinking.	Liaison with A.A. and Probation Officer. Wife put in touch with social agencies when in distress.	C
E.M.	M	36	Anxiety state. Inadequate personality	Poor	0	Financial. Incompatibility with husband and children.	Close contact with G.P. Obtained assistance from Welfare Department, Legal Dept., Children's Dept., British Legion, SSAFA, Poole and Bournemouth Housing Dept., Education Dept., and contact with Court and D.M.O.H.	A
B.J.	M	29	Suicidal. Hysterical and immature	None given	0	Marital difficulties. Housing problems.	Help over housing. Supportive visits.	C
H.J.	M	21	Hysteric psychopath personality	None given	0	Marital problems and difficulties regarding children's upbringing.	Supportive visits fortnightly, increased in times of stress. Liaison with Doctors. Contacted Child Guidance Clinic	A

G.L.	D	33	Reactive depression	None given	0	Loneliness. Domestic stress. Eldest boy on probation. Immature personality.	Regular supportive visits and discussion of domestic and social difficulties. Liaison with Child Guidance Centre, Probation Officer, Dr. Barnardos and others.	B
E.M.	Septd.	44	Paranoid reaction to stress	Doubtful	0	Distress over delay in completion of house alterations.	Contact with building firms. Discussion to help her accept husband's desertion.	A
C.M.	W	74	Recurrent agitated depression	None given	0	Loneliness after husband's death and poor physical health.	Occasional visits to see progress maintained.	C
A.M.	S	41	Schizophrenic	Poor	0	No social difficulty other than that created by the patient's paranoid delusions.	Supportive visits to patient's mother.	C
Mrs. P.	W	56	Depression with paranoid ideas	None given	0	Recent death of husband. Loneliness. Financial worries.	Encouraged to get job and join clubs. Discussions re financial position. Occasional supportive visits.	B
A.P.	W	39	Paranoid schizophrenia in a dullard	Rather guarded	1	House difficulties. Over anxious about children.	Helped to obtain house. Encouraged to get job which she has done and to attend social functions which she also has done.	A
N.R.	M	68	Agitated depression	Doubtful	1	Sick husband. Loneliness. Financial difficulties.	Contacted meals on wheels and W.V.S. Obtained wheel chair.	B
L.L.	W	72	Confusional state with early senility	None given	1	Lives in bed sitting room in house with other bed sitting rooms filled with elderly people.	Pre care for 10 months. After care 5 months. Contact with G.P. and relatives in London.	C

<i>Name</i>	<i>Status</i>	<i>Age</i>	<i>Diagnosis</i>	<i>Prognosis</i>	<i>Hospital re-admis. over the period</i>	<i>Nature of social difficulty</i>	<i>Assessment of contribution of case work after care in preventing further breakdown</i>	
B.R.	S	47	Alcoholism. Inadequate personality	None given	0	Loneliness. Incompatibility with aged parents with whom she lives. Difficult in making social relationship.	Frequent supportive visits. Dis- cussions re parents. Contact with A.A.	B
L.V.L.	S	43	? Depressive illness	None given	0	Unsuitability of job. In- clined to over work. Con- tact with Labour Exchange.	Contact with Labour Exchange. Arranging training course which she is doing successfully.	B
M.S.	M	77	Mixed depression showing signs of dementia	Guarded	0	Worry over spastic M.D. daughter. Poor physical health. Loneliness.	Occasional supportive visits, in- creased during husband's illness. Contacted W.V.S.	B
I.K.	Septd.	45	? Paranoid schizophrenia	None given	0	Accommodation difficulties. Mental illness prevents her from keeping job.	Found accommodation, also various jobs. Ensure that she has N.A.B. when off sick.	A
F.S.	M	61	Recurrent depression of a schizo affective type	Doubtful	1	Loneliness. Some difficulty with social relationship.	Supportive visits increased during recent depressive illness. Liaison with doctor.	A
A.K.	W	73	Agitated depression	Uncertain	0	Loneliness.	Supportive visits to patient and daughter. Close liaison with G.P.	A
M.B.	M	35	Emotionally disturbed after birth of child. Hallucinated	Immature and hysterical personality	0	Marital problems and diffi- cult relations between hus- band and patient's illegiti- mate daughter. Physical	Liaison with Health Visitors and N.S.P.C.C. Supportive visits and discussions following child being admitted to hospital with head	C

	DEPRESSION	RELAPSE			CONTACT WITH CONTACT.	DEPRESSION AND TOWARDS HIS death.
K.B.	S	35	Schizophrenic	Doubtful	0	Bored at home. Unemploy-able. Occasional home visits. Patient attends weekly O.T. group at Turner Training Centre under Social Worker.
L.H.	W	68	Senile mental depression	Liable to relapse	1	Financial and social stress. Has M.D. daughter aged 36. Poor manager. Dependent personality.
B.T. (daughter of above)	W	36	Schizophrenia. Subnormality	Poor	1	As above.
E.B.	W	71	Senile hypo-chondriasis	Doubtful	0	Hypo-chondrial. Liaison with Dr. Turton and occasional supportive visits. Encouraged to attend Old Age Pensioners Club (which she did).
F.T.	M	62	Endogenous depression	Poor	1	Unsatisfactory accommoda-tion. Help in finding other accommoda-tion. Supportive visits. Liaison with G.P.
R.C.	S	29	Schizophrenia	Relapse likely	0	Unemployment, loneliness, self conscious. Attended O.T. group until obtained job. Appears stable. Occasional visits.
B.S.	M	28	Anxiety depressive state	Good	0	Housing difficulties. Assistance with finding accommo-dation.

<i>Name</i>	<i>Status</i>	<i>Age</i>	<i>Diagnosis</i>	<i>Prognosis</i>	<i>Hospital re-admis. over the period</i>	<i>Nature of social difficulty</i>	<i>Assessment of contribution of case work after care in preventing further breakdown</i>	
P.C.	M	36	Neurotic	None given	0	Marital incompatibility. Poor physical health.	Frequent discussions regarding marital problems, liaison with doctors, contacting Marriage Guidance. Patient encouraged to obtain evening work. Supportive visits continuing.	B
M.S.	S	70	Agitated depression	Doubtful	1	Mental condition prevents her from managing domestic affairs.	Close liaison with doctors, attempts to encourage relatives to take interest in patient. Meals on wheels, home help and animal care arranged. Daily visits over periods of stress.	A
H.C.	M	35	Schizo-affective psychosis and depressed	None given	0	Marital difficulties, inability to cope with household affairs and two children.	Supportive visits regularly and daily visits during depressive episodes.	A
D.S.	Septd.	60	Manic depressive	Further relapse probable	1	Difficulties with landlady.	Gaining confidence of the landlady in order to ensure patient's stay in her lodgings.	B
D.D.	M	56	Depressive psychosis	None given	1	No apparent social stress.	Occasional supportive visits. Liaison with doctor.	C
D.S.	M	46	Schizo-paranoid	Poor	1	Aggressive and disruptive behaviour in patient causes	Visits to support wife and family	B

A.F.K.	M	54	Depression	Poor	1	Delayed reaction due to stress during war-time—losing contact with her children.	Supportive visits to patient and husband.	B
B.S.	S	18	Schizophrenia	Relapse likely	1	Parents both have had psychiatric treatment. Mother hysterical. Father depressed. Loneliness. Unemployment.	Contacted Crescent Club which she attends regularly. Arrangements made for her to attend Turner Training Centre full time. Frequent discussion with mother.	B
B.P.	S	31	Paranoid Schizophrenic	Poor	1	Loneliness. Living with elderly parents. Inability to keep job through mental illness.	Arrangements made for attendance at Turner Training Centre every day. Put in touch with Crescent Club, now an active committee member. Has gained confidence.	A
M.S.	W	50	Paranoid Schizophrenic	Further relapses are probable.	0	Lives with elderly mother. Loneliness. Worries about daughter at boarding school.	Occasional supportive visits increased during relapse due to husband's death. Encouraged to make social contacts.	C
G.J.	S	56	Endogenous depression in a man of low intelligence	None given	0	Worry over employment.	Supportive visits and advice about employment.	B
B.J.	S	30	Schizophrenic	Poor	0	Loneliness. Lack of confidence in obtaining job.	Used to attend weekly O.T. group until confident to obtain job. Encouraged to take up painting again.	A

<i>Name</i>	<i>Status</i>	<i>Age</i>	<i>Diagnosis</i>	<i>Prognosis</i>	<i>Hospital re-admis. over the period</i>	<i>Nature of social difficulty</i>	<i>Assessment of contribution of case work after care in preventing further breakdown</i>
Mrs. J.	W	? 65	Depression	None given	0	Difficult relationships with son and daughter-in-law.	Supportive visits during periods of stress. Contact with St. Ann's. B
L.T.	M	41	Drug addiction in an unstable schizo personality	Very guarded	0	Difficult relationship with husband who is mainly away on Army service. Over anxious about her two children. Mother physically ill.	Regular supportive visits increased during periods of instability. A
H.H.	M	63	Recurrent depression and addicted to alcohol	Poor	0	No apparent social stress but worried over her condition.	Weekly regular visits, daily when depressed. Contact with the A.A. B
G.G.	M	52	Paranoid Schizophrenic	Poor	1	No apparent social difficulties — retired business man living in comfortable circumstances.	Supportive visits to wife. C
H.G.	W	64	Paranoid psychosis associated with arteriosclerosis and heart trouble	Poor	0	Difficulty in adjusting to reduced circumstances.	Regular supportive visits. Assistance over social difficulties in which she has involved herself. B
A.G.	M	67	Toxic confusional	Fair	1	Unsuitable accommodation has second floor flat and suffers from heart condition	Housing department contacted. Supportive visits. B

J.R.	S	Age	Diagnosis	Delirium	U	Aggressive socially and unable to offend other people. Mother has heart condition.	Regular monthly supportive visits.	B
N.F.	S	54	Recurrent endogenous depression	None given	0	Difficulty in obtaining job because of suppurating varicose ulcers.	Monthly supportive visits. Liaison with Labour Exchange.	B
B.T.	S	25	Chronic paranoid schizophrenia	"Unlikely to make the grade"	1	Unemployment. Bad relationships with family.	Helped to obtain job which she did. Encouraged social activities.	B
J.E.	Cohabiting	55	An alcoholic psychopath	Poor	2	Bad relationships with co-habitee.	Support to "wife".	B
M.V.	M	76	Depression	Not hopeful	0	Incompatibility with husband. Poor physical health. Loneliness.	Regular supportive visits increased during depressive episodes.	B
E.E.	W	49	Hysteria with depressive component	Fair	0	Marital difficulties. Domestic stress. Poor management of children.	Three months pre-care. Admission following husband's suicide. Visited weekly since discharge. Now also supporting patient's mother.	B
C.W.	S	28	Chronic Schizophrenic	None given	0	Illness restricts social contacts and results in unemployment and loneliness.	Liaison with St. Ann's. Encouraged to attend O.T. and make social relationships.	A
P.E.	S	47	Chronic paranoid schizophrenia	Poor	0	Difficulty over making social contacts.	Regular visits which patient appreciates and relies upon.	A
E.M.E.	S	69	Recurrent depression	Relapses seem possible	3	Occasional instability prevents her making satisfactory relationships.	Weekly visits to patient, support to landlady.	C

<i>Name</i>	<i>Status</i>	<i>Age</i>	<i>Diagnosis</i>	<i>Prognosis</i>	<i>Hospital re-admis. over the period</i>	<i>Nature of social difficulty</i>	<i>Assessment of contribution of case work after care in preventing further breakdown</i>
E.W.	M	42	Depressive illness with reactive and hysterical features	Dependent on marital situation	0	Marital difficulties. Over anxious personality.	B Encouraged to obtain part time job. Supportive visits and discussions re problems.
F.E.	M	60	Agitated depression	Guarded	1	Employment difficulties. Dominated by wife.	B Assistance over employment. Modification of wife's attitude.
M.W.	S	41	Schizophrenia	None given	0	Illness results in difficult social relationships and unemployment. Loneliness.	B Attends O.T. group every week. Encouraged to get job and attend Crescent Club.
W.M.-D.	M	32	Neurotic anxiety in an inadequate personality. Drug addiction	Very guarded	1	Personality prevents keeping job.	C Supportive visits to wife.
V.W.	M	53	Paranoid psychosis	None given	1	No apparent stress in present environment but unhappy childhood. Over anxious personality.	C Regular weekly visits since suicidal attempt.
R.D.	Cohabiting	33	Depression in an inadequate personality	Poor	0	Poor home conditions. Problem family.	A Contact with National Assistance Board, Health Visitor. Fortnightly visits and more frequent when necessary.

K.C.	M	54	Agitated depression Inadequate personality	Hysterical traits	0	Unable to work because of nervous condition. Lives with wife who mothers him. Lives on National Assistance.	Regular two monthly visits. Support to wife.	C
C.W.	S	32	Schizophrenia	None given	1	Unable to work because of mental illness. Lives with parents.	Attends O.T. group regularly. Occasional visits. Encouraged to attend Crescent Club (Re-admission two weeks so mother could have holiday).	A
M.C.	S	43	Paranoid schizophrenic	Poor	0	Unable to work because of mental condition. Lives with elderly mother.	Monthly supportive visits. Liaison with Psychiatrist.	B
P.W.	S	22	Schizo affective illness	Guarded	1	Parents lack understanding. Mental illness results in lack of confidence.	Seen regularly for pre care 5 months. Liaison with Dr. Andrews. Regular weekly supportive visits.	B
B.C.	W	63	Manic depressive illness	Likely to recur	0	Lives alone; does not seem to mind this. Few friends.	Monthly supportive visits.	B
M.C.	S	39	Recurrent depression in an over dependent neurotic personality	Guarded	0	Reluctant to take employment.	Obtained National Assistance. Encouragement to obtain work. Close contact with doctor and psychiatrist, is now working.	A
J.C.	S	39	Depression in a basically hysterical personality	Very guarded	0	Over indulgent and dominating mother.	Intensive work with patient and mother. Attends at O.T.	A

<i>Name</i>	<i>Status</i>	<i>Age</i>	<i>Diagnosis</i>	<i>Prognosis</i>	<i>Hospital re-admis. over the period</i>	<i>Nature of social difficulty</i>	<i>Assessment of contribution of case work after care in preventing further breakdown</i>	
B.B.	S	28	Schizophrenic	Guarded	0	Excessive worry over skin condition in hair. Lives with elderly grandmother.	Six weekly visits to grandmother. Arrangements for barber to call at home, did much to relieve patient's anxiety.	A
L.B.	W	55	Recurrent agitated depression. Limited intelligence	Guarded	0	Family unco-operative over medication for patient.	Fortnightly visits to gain family's co-operation in continuing treatment (which is effective).	A
V.B.	S	59	Recurrent depression	Guarded	0	Lives alone but this does not seem to worry her. Lack of confidence on discharge.	Encouraged to take up old pursuits (which she did).	B
J.B.	M	37	Manic depressive psychosis	Recurrent moods swings are likely	0	Incompatibility with husband. Inadequate mother.	Discussion of family difficulties. Liaison with G.P. and psychiatrist.	B
S.W.	M	38	Psychotic depression Post history	Possible relapse	0	Difficulty in making friends.	Social Worker only visitor. Social Worker also to make necessary social contacts.	B
J.A.	M	52	Chronic schizophrenia Cardiac trouble	None given	0	Family difficulties. Incapable of getting work.	Visits to ensure patient is not deteriorating.	C
M.A.	S	18	Schizophrenia	Doubtful	1	Relapse prior to domestic science exam. Now doing nursery nursing course.	Assistance in getting place on course following re-admission.	B

E.W.	Septd.	52	Recurrent depression Hysterical component	Liable to recurrence	0	Not paying bills. No confidence to obtain employment.	A	Creditors negotiated with. Accompanied on interviews for jobs. Daily visits when depressed. Job obtained. Well since.
M.A.	M	59	Depressed. Suicidal attempt. Hallucinated	Unstable because of bad physical health	0	Domestic duties found overwhelming due to physical ill-health.	C	Put in contact with N.A.B. supportive visits during depressive episodes.
M.W.	S	41	Chronic paranoid Schizophrenia	Poor	0	No social stress. Looks after elderly parents.	B	Stressing importance of continuing medication.
M.B.	S	52	Paranoid psychosis	Unfavourable	1	Social loneliness. Unemployment. Domestic difficulties. Lives with mother folie a deux.	A	Encouraged to take job and join social and sports club. Helped to be more relaxed through discussion of paranoid ideas. Also support during mother's recent mental illness.
A.W.	M	26	Hysteria	Poor	1 (1 night)	Lonely. Difficulty in mixing with other people.	A	Discussed relationships with parents and husband. Put in touch with art dealer. Close liaison with G.P.
M.B.	W	49	Depression mixed endogenous/reactive	Remains basically inadequate and depressive in outlook	0	Domestic problems in coping with reduced financial and social circumstances. Two children (14 and 11).	A	On return from hospital helped clean and prepare flat, obtained furniture. Contacted N.A.B. and Dr. Barnardos. Helped her to adjust to son going to residential E.S.N. School. Weekly supportive visits.
N.W.	S	51	Hysteria in an inadequate personality	Poor	0	Involved with sick mother, with cancer, enjoying a martyr role.	C	Prevention of worsening of symptoms by helping patient and mother to see their situation more realistically.

<i>Name</i>	<i>Status</i>	<i>Age</i>	<i>Diagnosis</i>	<i>Prognosis</i>	<i>Hospital re-admis. over the period</i>	<i>Nature of social difficulty</i>	<i>Assessment of contribution of case work after care in preventing further breakdown</i>	
G.B.	M	40	Neurotic depression	Inadequate and deficient in drive. Persistently refused treatment in hospital	0	Financial and marital difficulties exaggerated when depressed. Lonely. Blamed mother's recent suicide on herself.	Contacted Church and encouraged social activities. Helped by discussion. Visiting stopped at patient's request for 5 months but contact maintained. Now visits resumed at patient's request.	B
M.W.	M	50	Recurrent depression	Poor	1	Over dependent on elderly widowed mother. Sense of guilt about M.D. child.	Daily visits when depressed. Weekly visits otherwise. Close contact with G.P. and Psychiatrist to ensure early treatment.	A
B.E.	S	24	Paranoid Schizophrenic	Poor	0	Inability to obtain work through mental condition. Difficulty with social relationships particularly at home.	Close contact with psychiatrist and G.P. Contact with Labour Exchange for admission to I.R.U. Egham.	A
G.H.	S	47	Reactive depression in an immature personality	None given	0	Loneliness. Difficulty with social relationships, particularly antagonising others.	Extensive case work and regular supportive visits.	A
M.M.	W	73	Recurrent depression	None given	0	Difficulty with social relationships.	W.V.S. contacted for meals on wheels. Obtained deaf aid for patient which has helped her considerably. Regular monthly visits.	B

G.C.	W	62	Paranoid psychosis	Guarded	0	Difficulty in making social relationships reactive to illness.	Regular supportive visits. Helped to obtain employment. Helped with applying for pension. (Patient Italian).	B
N.R.	S	44	Recurrent depression.	None given	0	Inability to obtain work because of nervous agitation.	Close contact with D.R.O. and a suitable job obtained.	C
J.G.	S	42	Conversion hysteria	None given	0	Loneliness. Social difficulties reactive to illness. Over eating.	Regular supportive visits. Helped to obtain accommodation. Encouraged social activities.	B
M.W.	W	47	Schizophrenic. Border line mental defective	Reasonably good	0	Loneliness. Married sick husband who died in six weeks.	Supportive visits. Contact with housing department, National Assistance Board and arrangements for a convalescent holiday.	A
R.F.	S	28	Chronic schizophrenic	None given	1	Social and employment difficulties reactive to illness.	Encouraged to obtain work and join clubs.	C
F.D.C.	M	57	Paranoid schizophrenic	Guarded	0	No social difficulty other than created by patient's hallucinations.	Supportive visits to see patient takes medication.	B

Although the majority of Bournemouth patients were admitted to Park Prewett Hospital, Basingstoke, over 60 miles away, tribute must be paid to the excellent out-patient clinic held in Bournemouth by Dr. Turton, Consultant Psychiatrist to Park Prewett Hospital, and by Drs. Andrews and Jenkins, Consultant Psychiatrists to the Wessex Regional Hospital Board.

The Department's social workers attend many of these out-patient sessions with their own patients, often conveying them thither in their own cars, and undoubtedly the relapse rate would have been far higher but for their combined efforts.

Mental Subnormality

During the year 19 new cases of mental subnormality were reported, 11 of them being children who were reported by the Education Authority. Eight were under the age of 15 years and were unable to benefit from education in normal schools, the remaining three were cases requiring supervision after leaving school.

The position at the end of the year was that 337 cases of mental subnormality were on the authority's registers, as follows :—

* In hospitals	...	...	...	...	...	...	152
Attending the Turner Training Centre and living at home	...	...	...	...	...	...	76
Attending the Training Centre of another authority	...	...	...	...	...	...	1
Under Guardianship	...	...	...	...	...	...	9
Living at home	...	...	...	...	...	...	99
							<hr/> 337 <hr/>

* The majority of cases in hospital were at Coldeast and Tatchbury Mount Hospitals, the complete distribution being as follows :—

Coldeast Hospital	...	...	...	67
Tatchbury Mount Hospital	...	...	...	59
Coldharbour Hospital	...	...	...	7
Brentry Hospital	...	...	...	1
Port Bredy Hospital	...	...	...	1
St. Lawrence's Hospital	...	...	...	1
St. Mary's Home	...	...	...	1
Stoke Park Hospital	...	...	...	1
Leavesden Hospital	...	...	...	1
Hortham Hospital	...	...	...	1
Royal West Counties Hospital	...	...	...	1
Home of the Holy Rood	...	...	...	1
Field Place Hospital	...	...	...	7
The Manor	...	...	...	1
Rampton Special Hospital	...	...	...	1
Moss-Side Special Hospital	...	...	...	1
				<hr/> 152 <hr/>

Twelve persons suffering from mental subnormality were admitted to hospital during the year, five to Coldeast Hospital, five to Tatchbury Mount Hospital, one to Coldharbour Hospital and one to Park Prewett Hospital. Eleven of these cases were admitted informally, the other one for observation under Section 29 of the Mental Health Act. The period was extended under Section 25, and he was eventually admitted for treatment under Section 26 of the Act.

In addition, six persons were admitted to hospital for short periods in order to give their parents a short period of freedom from worry, or a holiday, and one other was temporarily accommodated privately because the parents had died.

Three deaths were notified among mentally subnormal persons, two in hospital and one at home.

At the end of the year four cases (one female and three children) awaited urgent hospital admission, and there were five less urgent cases on the waiting list.

Arrangements for training mentally subnormal children and adults in the community

The Training Centre was officially opened by the Mayor, Councillor Deric S. Scott, J.P., on the 26th June, 1961, and named

"The Turner Training Centre" in recognition of Lt. Commander J. H. Turner's long and valued service to the Health Committee.

During the year the Centre continued to provide training and rehabilitation for 78 persons who were on the register on 31 December. Of this number, two were not subnormal, but were convalescent following mental illness, and were admitted to the Centre on the recommendation of Dr. G. J. Bell, Senior Medical Officer for Mental Health.

<i>No. of children in attendance</i>	<i>Males</i>		<i>Females</i>		<i>Total</i>
	<i>Under 16</i>	<i>Over 16</i>	<i>Under 16</i>	<i>Over 16</i>	
Male Section	3	22	—	—	25
Female and Junior Section	17	—	21	15	53
Totals	20	22	21	15	78

As before, mid-day meals were provided through School Meals Service arrangements, and two special buses brought a large proportion of the children from "picking-up points" reasonably close to their homes. An ambulance was also used for those children suffering from physical or other handicaps requiring special transport arrangements.

The numbers attending the Centre have been gradually increasing, and a few carefully selected cases referred by the Psychiatric Clinics have also been given periods of training, with some success.

Open days, exhibitions and sales of work, and the annual sports day have given not only the Health Committee, but also a considerable number of parents and members of the public the opportunity of seeing what improvement can be achieved by skill and sympathetic handling of the children, and the staff are to be congratulated on their year's work.

Nursing Homes

At the end of the year 42 nursing homes were registered by the local authority, three fewer than in 1960. Accommodation was provided for 10 maternity and 553 medical and surgical cases.

Bournemouth Crematorium

Since the opening of the Crematorium in 1938, there has been a steady increase in this method of disposing of the dead, the yearly totals being :

1938	....	229
1939	....	384
1940		514
1941		557
1942	...	584
1943		693
1944	....	708
1945	....	742
1946	....	834
1947	....	1026
1948	...	1012
1949		1155
1950	....	1306
1951	... ..	1484
1952	... ..	1472
1953	... ..	1681
1954	... ..	1770
1955	... ..	1991
1956	... ..	2142
1957	... ..	2207
1958	... ..	2340
1959	... ..	2472
1960	... ..	2609
1961	... ..	2648

An analysis of the statistics for 1961 showed that 46.2 per cent. of applications for cremation came from within the Borough, while 53.8 per cent. were received from other areas.

The Medical Officer of Health is the Medical Referee to the Crematorium, and in an emergency has two deputies authorised by the Home Office, the Deputy Medical Officer of Health and a retired Assistant Medical Officer of Health.

NATIONAL ASSISTANCE ACT 1948, Section 47

Action was taken in one case during the year, brief details of which were :

Miss A.M.C. Living under unhygienic conditions, seriously ill with no one to look after her. Admitted to Christchurch Hospital under a Court Order, but died seventeen days after admission.

NATIONAL ASSISTANCE ACTS, 1948 - 1951 — INCIDENCE OF BLINDNESS

In Bournemouth, the registration of blind persons and the provision of welfare services for this category of disabled persons is carried out by the Welfare Services Committee, and the following information in respect of new registrations has been supplied by the Director of Welfare Services :

(i) Number of cases registered during the year in respect of which para. 7(c) of Forms B.D.8 recommends :—	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment ...	16	1	—	22
(b) Treatment (Medical, Surgical or Optical)	20	5	—	17
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	6	2	—	12

Public Health Laboratory Service

Report by Dr. G. J. G. King, Director of the Bournemouth Laboratory

NUMBER OF SPECIMENS RECEIVED FROM BOURNEMOUTH, 196							
Nose and throat swabs ...	...	...	...	...	...	...	5
Specimens of sputum ...	...	...	...	...	...	...	532
Specimens of faeces and urine ...	...	...	...	...	...	...	26
Specimens of water ...	...	...	...	...	...	...	56
Specimens of milk ...	...	...	...	...	...	...	37
Specimens of ice cream ...	...	...	...	...	...	...	12
Other human specimens (wound swabs, pus swabs, bloods, etc.)							22
Specimens of food (tinned foods, fresh meat, eggs, etc.) ...							13
Other Sanitary Specimens (sewage swabs, bottle rinses, veterinary, etc.)							13
							719

Specimens were submitted by :

	<i>Total Specimens</i>	
(a) Royal Victoria Hospital	189
(b) Chest Hospitals	2069
(c) Local Practitioners	174
(d) Public Health Department	1477
(e) Bournemouth Chest Clinic	3287
		7196

REPORT BY A. J. MORTIMER, METEOROLOGICAL REGISTRAR

1961 Summary

1961 opened with waterlogged conditions everywhere, the legacy of the record wet year which preceded it. January saw little improvement, with high rainfall and humid conditions. Fortunately February was both dry and mild, and in March there was no rainfall at all until the 31st, when .03 inches fell—the only rainfall in the month, making it the driest March ever recorded in Bournemouth. March was delightful with above average temperatures and sunshine. April, however, brought a setback. It was the wettest April on record and below average in sunshine. May was bright, dry and sunny, as were June, July and August. These three months produced only 2.82 inches of rainfall and the countryside became very parched and dry. Average conditions prevailed in September, removing the parched appearance from grass and foliage. October brought the usual equinoctial storms, with the well-remembered miniature tornado which did much structural damage at 5.45 p.m. on the 6th. November again gave average weather conditions, and the year ended with an early cold snap and snowfall.

SUMMARY

Highest temperature recorded	78 degrees on 30th August.
Lowest temperature recorded	19 degrees on 28th and 29th December
Greatest fall of rain in one day	1.33 inches on 29th January.
Total rainfall	31.00 inches (average 31.21 inches)
Total sunshine	1799.3 hours (average 1709.9 hours)
Number of days with sunshine	315.
Number of days with rain	156.
Mean temperature	51.3 degrees (average 50.9 degrees)

BOURNEMOUTH CLIMATOLOGICAL STATION.

Latitude 50° 44'N. Longitude 1° 53'W. Height above Mean Sea Level,
130 feet.

TABLES OF TEMPERATURE, SUNSHINE AND RAINFALL

1. TEMPERATURE.

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Average
1961
Absolute Maximum
Date
Absolute Minimum
Date
Mean Range
Humidity %

Mean temperature for 1961—51.3°. Average (Air Ministry)—50.9°.

2. SUNSHINE (Hours).

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Average 1961	62.3 52.9	79.2 63.9	137.3 170.9	175.5 117.9	213.6 258.4	229.8 269.9	210.8 230.6	203.1 200.1	151.8 144.8	115.3 144.2	71.7 64.8	59.5 80.9
Average per day (1961)	1.7	2.3	5.5	3.9	8.3	9.0	7.4	6.5	4.8	4.7	2.2	2.6
Highest amount in one day Date	7.0 15th	8.2 9th	9.8 31st	13.0 24th	14.0 13th	15.4 19th	14.7 5th	13.4 2nd	12.1 7th	9.2 13th	8.9 4th	7.8 2nd
Days with sunshine	19	18	30	26	29	28	31	31	27	29	23	24

Total for 1961 - 1799.3. Average (Air Ministry) - 1709.9.

3. RAINFALL (Inches).

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Average 1961	3.56 5.48	2.28 2.95	2.06 0.03	2.00 4.74	1.90 0.91	1.56 0.97	2.22 1.18	2.47 0.67	2.50 2.91	3.46 5.02	3.74 2.81	3.46 3.33
Daily Average	.18	.11	.001	.16	.03	.03	.04	.02	.10	.16	.09	.11
Greatest fall in one day Date	1.33 29th	.75 27th	.03 31st	1.17 25th	.23 3/4th	.40 12th	.50 12th	.18 10th	.54 12th	.91 21st	.79 9/10th	.44 29th
No. of days with rain	20	16	1	19	8	9	10	10	16	18	13	16

Total for 1961 - 31.00. Average (Air Ministry) - 31.21.

Water Supply

The entire Borough, except that part of Southbourne east of Irving and Clifton Roads, is served by the Bournemouth and District Water Company, the remainder as stated, being supplied by the West Hampshire Water Company.

Throughout the year, the supply has been satisfactory as regards quality and quantity.

A total of 332 samples of water for bacteriological examination at the Public Health Laboratory were obtained by the District Public Health Inspectors with satisfactory results.

I am indebted to the General Manager of the Bournemouth and District Water Company and to the Chief Engineer of the West Hampshire Water Company for the following information :—

		Bournemouth and District Water Co.	West Hants Water Co.
(a)	Quality and quantity of water supply throughout the year.	Satisfactory.	Satisfactory.
(b)	Number of bacteriological examinations of raw water made during the year.	251	312
	<i>Results</i> : Probable number of B. Coli organisms per 100 ml.	Varied from 110 to 92,000	Varied from 40 to 9,000
	Number of samples taken of water going into supply	365	326
	<i>Results</i> :	Grade I, Ministry of Health Standard. All coliform type bacteria absent from 100 ml. samples. (Specimen results of chemical analyses are appended).	
(c)	Plumbo-solvent action	None.	
(d)	Action taken in respect of any form of contamination	No specific action was necessary (other than sterilisation of sections of mains following repair).	
(e)	Number of dwellinghouses supplied from the public water mains (i) direct to houses	43,554	6,248
	(ii) by means of stand-pipes	None	None

THE BOURNEMOUTH AND DISTRICT WATER COMPANY
WATER ANALYSIS

<i>Sample</i> : Average Bournemouth Town Supply for 1961							Date
B. Coliform P.N. in 100 ccs.	...	...	...	...	...	...	0
Agar Cultures 24 hours at 37°C	...	...	...	...	...	...	0
„ „ 48 hours at 37°C	...	...	...	...	...	...	2
„ „ 72 hours at 22°C	...	...	...	...	...	...	35
Cl. Welchii Reaction ...	...	...	...	...	...	...	—
Colour (Burgess Scale)	...	...	...	...	...	...	10
Filtrability Index ...	...	...	...	...	...	...	—
pH ...	...	...	...	...	...	...	7.8
Electrical Conductivity at 20°C	...	...	...	...	...	...	420
Residual NH ₂ CL ...	...	...	...	...	...	...	0.10
<i>Results in P.P.M.</i>							
Chlorine in Chlorides ...	...	...	...	...	...	...	16
Nitrogen in Nitrates ...	...	...	...	...	...	...	2.83
Nitrogen in Nitrites ...	...	...	...	...	...	...	0.001
Free Ammonia ...	...	...	...	...	...	...	0.062
Ammoniacal Nitrogen	...	...	...	...	...	...	0.051
Albuminoid Ammonia	...	...	...	...	...	...	0.06
Albuminoid Nitrogen	...	...	...	...	...	...	0.05
Oxygen Absorbed (4 hours at 37°C)	...	...	...	...	...	...	0.638
Dissolved Oxygen ...	...	...	...	...	...	...	9.4
Free Carbon Dioxide	...	...	...	...	...	...	5.6
Alkalinity as CaCO ₃ ...	...	...	...	...	...	...	186
Silica as SiO ₂ ...	...	...	...	...	...	...	13
Phosphates as P ₂ O ₅ ...	...	...	...	...	...	...	0.29
Iron as Fe ...	...	...	...	...	...	...	Nil
Total Solids + Suspended	...	...	...	...	...	...	—
Total Dissolved Solids	...	...	...	...	...	...	278
Total Hardness ...	...	...	...	...	...	...	222
Carbonate Hardness ...	...	...	...	...	...	...	186
Noncarbonate Hardness	...	...	...	...	...	...	36

THE BOURNEMOUTH AND DISTRICT WATER COMPANY

MINERAL ANALYSIS - Parts per Million

Sample : Average Bournemouth Town Supply for 1961

Ca	Mg	Na	K	CO3	SO4	CL	NO3	SiO3	Probable Combinations	
74.40				111.60					Calcium	
7.76					18.60				Carbonate	186.00
2.24						3.97			Sulphate	26.36
									Chloride	6.21
									Nitrate	
									Magnesium	
									Carbonate	
	2.67					7.80			Sulphate	
									Chloride	10.47
									Nitrate	
									Sodium	
									Carbonate	
		2.75				4.23			Sulphate	
		4.68					12.60		Chloride	6.98
		2.00							Nitrate	17.28
								3.30	Silicate	5.30
									Potassium	
									Carbonate	
									Sulphate	
									Chloride	
			2.00						Nitrate	
								1.95	Silicate	3.95
									Other Silicates as	
									SiO2	8.80
									Ferric Oxide	Nil
										271.35
Total Solids Dried at 180°C										278.00

THE WEST HAMPSHIRE WATER COMPANY
ANALYSIS

WEST HANTS WATER, MAINS WATER, RIVER AVON DERIVED
SAMPLED AT WORKS

Chemical Results in Parts per Million.

Appearance : Bright and clear

Turbidity : Nil - 1

Colour : 2 - 30 Hazen

pH : 7.4 - 8.1

Electric Conductivity : 300 - 480

Chlorine present as Chloride : 16 - 18

Taste : Nil

Odour : Nil

Free Carbon Dioxide : 3-12

Total Solids : 200 - 330

Alkalinity as Calcium

Carbonate : 130 - 220

Hardness : Total : 170 - 250

Carbonate : 130 - 210

Non-carbonate : 20 - 40

Nitrate Nitrogen : 3.2 - 4.0

Nitrite Nitrogen : Nil

Ammoniacal Nitrogen* : 0.05 - 0.120

Oxygen Absorbed : 0.50 - 1.2

Albuminoid Nitrogen* : 0.03 - 0.120

Residual Chlorine : 0.2 - 0.5

Metals : Iron, Copper, Lead, Zinc, Manganese - Nil

* to convert to Ammonia multiply by 1.21.

MINERAL ANALYSIS - TYPICAL NORMAL FLOW

Calcium	86.4	Carbonate	126.0
Magnesium	4.9	Sulphate	14.0
Sodium	11.0	Chloride	18.0
Potassium	2.4	Nitrate	15.5
Organic, etc.	5.8	Silica	6.0

SEWERAGE AND SEWAGE DISPOSAL

The Borough Engineer has kindly supplied me with the following information :—

The town is served by main drainage apart from small areas and isolated buildings on the outskirts.

At present, the sewage from about one fifth of the town receives full treatment, and the new Sewage Disposal Works at Holdenhurst (now under construction) will eventually give full treatment to the remainder.

During the coming year, a foul sewer is to be constructed in Wick Village, which will allow the present unsatisfactory arrangement of cesspits and septic tanks to be discontinued, and by 1963 a new sewer under construction between Holdenhurst and Throop will serve buildings in the Throop area.

The scheme for full sewage treatment for the whole Borough, involving the construction of a sewage works, a sludge plant and considerable new sewer laying will take several years to complete, but will eventually lead to the complete disappearance of sewage in the Bay.

SANITARY CIRCUMSTANCES, HOUSING AND INSPECTION OF FOOD

Report by William Riley, Chief Public Health Inspector.

I. Housing

(HOUSING ACT, 1957, AND PUBLIC HEALTH ACT, 1936)

Number of houses inspected for housing defects	267
Number of visits made for the above purpose	1226

(a) Repair.

Houses found not in all respects reasonably fit for human habitation, but capable of repair	204
Defective houses made fit following informal action (*This includes houses brought forward from 1960)	*159
Houses in which defects were remedied after service of formal notices under the Public Health Act, 1936 :—	
(a) by owners	12
(b) by local authority in default of owner	Nil
Houses made fit after service of formal notices under the Housing Act, 1957 :—	
(a) by owners	Nil
(b) by local authority in default of owners	Nil

(b) Demolition and Closures (*Housing Act, 1957*).

(i) Houses demolished following formal action under Section 17	7
(ii) Local authority owned houses demolished	3
(iii) Houses closed	1
(iv) Parts of buildings closed	Nil

(c) Clearance Areas (*Housing Act, 1957, Part I I I*).

<i>Title of Order</i>	<i>Remarks</i>
County Borough of Bournemouth (Terrace Road) Compulsory Purchase Order, 1959	Negotiations in progress.

(d) Housing Repairs and Rents Act, 1954, and Rent Act, 1957.

Inspections made re applications for Certificates of Disrepair and the revocation thereof	35
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(e) **Overcrowding** (*Housing Act, 1957—Part I V*).

Number of houses inspected re alleged overcrowding	39
Number of houses found to be overcrowded	16
Number of cases of overcrowding abated	7
Number of houses visited to ascertain "permitted number" of persons who could occupy same for sleeping purposes on the standard prescribed by the Housing Act, 1957	24
Number of rooms measured to ascertain "permitted number"	85

(f) **Applications for Corporation Houses.**

In 33 cases, applicants' houses were inspected when any overcrowded or other unsatisfactory conditions were noted for subsequent action.

(g) **Movable Dwellings** (*The Caravan Sites and Control of Development Act, 1960*).

Under the new legislation, which came into operation on the 29th August, 1960, all caravan sites must have "site licences", and these are only issued to applicants after they have obtained Town Planning permission to use the land as a caravan site. There are certain exemptions from this licensing requirement, as for instance, where a caravan is sited within the curtilage of a dwelling-house and its use is incidental to the enjoyment of the house, or where caravans temporarily stationed on land are occupied by persons employed in building or constructional work on or near that land.

During the year thirteen site licences were issued to owners of existing caravan camps, and one licence was granted following a successful Town Planning appeal. In addition, eight licences were issued to persons holding Town Planning rights to use land as caravan sites for single caravans.

With regard to the conditions attached to licences for multiple sites specifying the layout of and the provision of facilities, services and equipment at those sites, the Council adopted, with one significant variation, the Model Standards laid down by the Minister of Housing and Local Government in pursuance of his powers under Section 5(6) of the Act. The varied condition requires that caravans in separate occupation shall be 30 feet apart, instead of 20 feet as laid down by the Minister. In practice, the Standard Conditions were

further modified, regard being had to the particular circumstances affecting each existing site.

Of the fourteen licences issued in respect of multiple sites ("caravan parks"), ten were for a period of five years or less, two were granted in perpetuity, and two imposed "run-down" conditions with a view to the closure of the sites by the 7th February 1964.

Six of the eight licences for individual caravan sites expired at the end of the year; one was granted until the Town Planning permission expires in July, 1963 and one was granted in perpetuity the landowner having "existing use rights".

In no case was an appeal made to the magistrates against any condition of a site licence on the grounds that it was unduly burdensome.

During the year 182 visits were made to caravan sites for survey purposes in connection with the issue of licences and to ensure that reasonable standards were maintained.

(h) **Land Charges Enquiries.**

During the year 4,663 enquiries regarding various properties were dealt with.

II. Inspection of Food and Food Premises

Regulation 34 of the Food Hygiene (General) Regulation 1960, reads :—"Any person guilty of an offence against these regulations shall be liable to a fine not exceeding one hundred pounds or to imprisonment for a term not exceeding three months or both and, in the case of a continuing offence, to a further fine not exceeding five pounds for each day during which the offence continues after conviction". Even if they were aware of it, the threats conveyed in this statement would not in any way influence the vast majority of food traders in the Borough as the standard of hygiene maintained in most food premises in the town is already well above average.

Nevertheless, the routine inspections and supervision of hotel and restaurant kitchens and of food shops is essential in a resort where catering is a major industry and where food poisoning outbreaks and dirty conditions would adversely affect the town's popularity with visitors and residents.

To this end, four temporary Inspectors were again employed during the months of July, August and September to augment the duties of the permanent staff.

215 notifications were sent during the year regarding contraventions found and these were, in most instances, complied with promptly.

The outstanding notices dealt mainly with structural alterations or re-decoration work. Arrangements were made for these to receive attention prior to the commencement of the 1962 season.

Details of inspections of food premises are given below :—

<i>Type of Premises</i>	<i>No. in Borough</i>	<i>No. of Visits</i>
Bakehouses	54	219
Cafes and Restaurants	173	711
Confectioners' and Pastrycooks' Shops	146	270
Cooked Meat Shops	54	246
Fishmongers' and Poulterers' Shops ...	52	189
Fried Fish Shops	31	75
Greengrocers' Shops	163	338
Grocers' Shops	345	984
Gut Scraping Works	1	5
Hotel and Boarding House Kitchens ...	1248	1913
School Feeding Centres	38	67
Works Canteens	31	51

In addition, 74 inspections were made of stalls and street vendors' vehicles.

(a) **Meat Inspection.**

This forms a relatively small part of a Public Health Inspector's duties in Bournemouth, as there are no slaughterhouses in the Borough as defined in the Food and Drugs Act, 1955.

All home-killed meat sold in Bournemouth is brought into the town from slaughterhouses and markets in other districts and from the modern abattoir at Uddens Cross, near Wimborne.

443 visits were made during the year to the 113 butchers' shops and 8 wholesale meat stores to ensure that meat and offals for sale were fit for human consumption and that reasonable standards of hygiene were maintained.

Three slaughtermen's licences were renewed during 1961.

(b) **Milk Supplies.**

As required by the Milk (Special Designations) (Specified Areas) Order, 1952, all milk sold in Bournemouth is of the following special designations :—

(1) *"Pasteurised" and "Tuberculin Tested (Pasteurised)" Milk.*

Supplies of these were processed and bottled at three licensed pasteurising plants in Bournemouth and at three in Poole. Early in the year, however, one of the Bournemouth dairies ceased production and obtained milk already processed and bottled on premises in Poole.

(2) *"Sterilised" Milk.*

A small quantity of this milk, processed and bottled in another district, is sold in Bournemouth.

The supervision of milk production at farms is the responsibility of officers of the Ministry of Agriculture, Fisheries and Food. There are, however, very few dairy farms in the Borough.

The supervision of the pasteurisation, bottling and distribution of milk is the responsibility of the Public Health Inspector and details of these duties are given below.

(i) **THE MILK AND DAIRIES (GENERAL) REGULATION, 1959.**

	<i>Number</i>	<i>Inspection</i>
Dairies	3	132
Pasteurising Plants	3	54
Milk Shops selling bottled milk	283	233

(ii) **THE MILK (SPECIAL DESIGNATION) REGULATION, 1960.**

As from the 1st January, 1961, dealers' (pre-packed) milk licences were introduced to permit the sale of three kinds of specially designated milk (viz : "pasteurised", "tuberculin tested" and "sterilised") where the milk is obtained by the dealer in the container in which it is to be supplied to the consumer, or is pasteurised or sterilised by the dealer. Furthermore, the period for which a dealer's licence is granted has been extended from one year to five years, and the issue of "supplementary" licences is no longer necessary. These changes have substantially reduced the clerical and administrative work involved in the issue of licences to shopkeepers selling bottled milk.

During the year, 283 shopkeepers were granted dealer's (pre-packed) licences to permit the following designations of milk to be sold until the 31st December, 1965.

"Pasteurised" ...	274
"Tuberculin-Tested"	154
"Sterilised"	117

Three Dealers' (Pasteurisers') Licences and three Dealers' (Bottlers') Licences for Tuberculin Tested Milk were also issued.

240 samples of "Pasteurised" milk, 89 of "Tuberculin Tested (Pasteurised)" Milk and 38 of "Sterilised" milk were subjected to the prescribed tests at the Public Health Laboratory and found satisfactory.

(c) Ice Cream.

THE FOOD AND DRUGS ACT, 1955, SECTION 16.

THE ICE-CREAM (HEAT TREATMENT, ETC.) REGULATIONS, 1947-1952.

<i>Number of premises registered during 1961</i>		<i>Total number of premises on register</i>	<i>Number of visits to premises during 1961</i>
For manufacture	Nil	3	25
For storage and sale	21	616	377

126 samples of ice-cream were submitted to the methylene blue test at the Public Health Laboratory, with the following results :—

<i>Number of samples</i>	<i>Result (Provisional Grade)*</i>
97	Grade I
11	Grade II
7	Grade III
11	Grade IV

* Grades I and II are classed as satisfactory ; but where a series of samples from the same supply fall within Grades III and IV, the bacteriological condition of the ice-cream is considered unsatisfactory.

The unsatisfactory samples, representing 16.6 per cent. of the number taken, were due to the failure of retailers to keep serving equipment clean where loose ice-cream was sold from bulk at mobile kiosks, etc. After warnings were given, "repeat" samples were found to be satisfactory.

(d) **Ice Lollies.**

35 samples were submitted to the Public Health Laboratory where all but four of them were found to be satisfactory. Appropriate action resulted in satisfactory repeat samples being obtained.

3 samples taken for chemical analysis proved satisfactory.

(e) **Water Cress.**

5 of the 6 samples of water cress submitted for bacteriological examination were found to be contaminated by organisms of faecal origin. The gypsy suppliers and greengrocers concerned were promptly warned.

(f) **Prepared Foods** (*Food and Drugs Act, 1955, Section 16*).

116 premises in the Borough are registered for the manufacture of meat or fish products and during the year 93 inspections were made of this type of premises. 54 routine samples of these products were examined and all were found to be bacteriologically satisfactory.

(g) **Other Foodstuffs.**

48 samples of other foods, including sandwich spread, desiccated coconut, cream confectionery, cheese, frozen peas, hot chocolate drink, figs, dates and beetroot were all found to be satisfactory when subjected to bacteriological examination at the Public Health Laboratory.

(h) Foodstuffs Condemned.

During 1961, 8 tons, 12 cwts., 0 qr., 2 lbs. of foodstuffs were condemned by your Inspectors, as unfit for human consumption. This amount is 28 per cent. less than in the previous year.

Details are as follows :—

<i>Description</i>	<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
Fish		5	1	5
Meat	2	1	2	23
Tinned Goods ...	5	5	1	1
Other Foods ...		19	3	1

Some of the above food was destroyed ; a quantity was used for animal feeding (with due observance of necessary safeguards) and the remainder was collected by a private firm for processing into industrial fats and fertilisers.

(i) Gerber Testing of Milk.

Throughout the year one of the District Public Health Inspectors (Mr. Clarkson) carried out routine sampling and Gerber testing of milk sold by retail.

The 218 samples taken (comprising 109 of "Pasteurised", 54 of "Tuberculin Tested (Pasteurised)" and 55 of "Channel Islands" Milk) were all found to conform to prescribed standards for milk-fat content and non-fatty solids.

(j) Sampling of Food and Drugs.

In 1961 the Public Health Inspectors, acting as Sampling Officers, obtained 271 routine samples of food and drugs as follows :—

	FORMAL SAMPLES		INFORMAL SAMPLES		TOTAL
	<i>Found to be genuine</i>	<i>Found to be adulterated</i>	<i>Found to be genuine</i>	<i>Found to be adulterated</i>	
FOOD	32	3	181	13	229
DRUGS	—	1	39	2	42
TOTAL	32	4	220	15	271

It will be noted that of the 271 samples taken, 19 were found to be adulterated, a percentage adulteration of 7.01.

The incidence of adulteration in the County Borough during the past five years is as follows :—

	1957	1958	1959	1960	1961
No. of samples taken ...	471	418	290	188	271
No. of samples adulterated	20	29	12	7	19
Percentage adulteration ...	4.2	6.9	4.1	3.7	7.01

36 Formal Samples

	<i>Nature of Sample</i>	<i>No. taken</i>	<i>No. found to adulterated</i>
FOODS			
	Almonds, ground ...	4	—
	Arrowroot ...	2	—
	Cake ...	3	—
	Champagne Perry ...	1	—
	Chicken, Boned and Skinless	1	1
	Chutney ...	3	—
	Cider ...	2	—
	Cream ...	3	—
	Cream cakes ...	1	1
	Currants ...	1	—
	Custard Powder ...	3	—
	Luncheon Meat ...	1	—
	Meat Pies ...	3	—
	Pudding and Cake Mixes ...	3	—
	Soups, canned ...	3	—
	Vinegar, Raspberry ...	1	1
DRUGS			
	Witch hazel ...	1	1
	TOTAL FOOD AND DRUGS ...	36	4

235 Informal Samples

	<i>Nature of Sample</i>	<i>No. taken</i>	<i>No. found to adulterated</i>
FOODS			
	Acetic Acid ...	3	—
	Almonds, ground ...	5	—
	Apples ...	2	—
	Arrowroot ...	3	—
	Baked Beans ...	3	—
	Blackcurrant drink ...	3	—
	Butter ...	3	—
	Caraway Seeds ...	1	—
	Cheese ...	1	—
	Cheese Spread ...	2	—

<i>Nature of Sample</i>	<i>No. taken</i>	<i>No. found to be adulterated</i>
Cherry Brandy ...	1	—
Chicken, boned and skinless ...	1	1
Chicken in jelly, canned ...	2	1
Chicken, canned ...	1	—
Chocolate Creams ...	2	—
Coffee ...	1	1
Corned Beef Loaf ...	1	—
Cream ...	5	—
Cream Cakes ...	9	2
Currants ...	6	1
Custard Powder ...	6	—
Dried fruit ...	6	—
Faggots ...	2	—
Flavouring ...	2	—
Food colours ...	2	—
Fruit curd ...	3	—
Glucose Drink ...	1	—
Grapefruit in Syrup ...	1	—
Ice Lollies ...	3	—
Instant Coffee ...	3	—
Irish Stew ...	3	—
Jam ...	6	—
Lemonade Powder ...	3	—
Luncheon Meat ...	3	2
Mace, ground ...	1	—
Marmalade, diabetic ...	3	—
Milk ...	10	—
Milk, goats' ...	4	—
Milk Loaf ...	3	1
Milk Shake ...	1	—
Nutmeg, ground ...	1	—
Onions, dried ...	1	—
Parsley and Thyme Stuffing ...	3	—
Pearl Barley ...	6	—
Pears ...	1	—
Pepper ...	1	—
Pickle ...	3	—
Pork Polony ...	1	—
Potatoes, dehydrated ...	2	—
Prepared Oranges ...	1	1
Raspberry Liqueur ...	1	—
Rhubarb in Syrup ...	3	—
Rose Hip Syrup ...	2	—
Sausage Meat, pork ...	3	—
Sausages, Pork ...	2	—
Slimming Foods ...	3	—
Soft Drinks ...	12	—
Soup, canned ...	3	—
Sultanas ...	1	—
Tea ...	6	—
Tomato puree ...	1	—
Turmeric ...	3	—
Vinegar, malt ...	3	1
Vinegar, cider ...	1	—
Vinegar, raspberry ...	5	1
Wine aperitif ...	1	—
Wine sauce ...	1	1
Wine, tonic ...	2	—

	<i>Nature of Sample</i>	<i>No. taken</i>	<i>No. found to be adulterated</i>
DRUGS			
	Almond Oil	3	—
	Aluminium Paste Compound ...	2	—
	Analgesic Tablets	2	—
	Calamine Cream and Witch Hazel	1	—
	Extract of Cochineal	1	—
	Gregory's Powder	2	—
	Gregory's Tablets	1	—
	Iodine, colourless, tincture of	1	—
	Iodine, decolourised, tincture of	2	—
	Kaolin Mixture	3	—
	Laxative Tablets	1	—
	Linctus	2	—
	Mentholated Balsam	1	—
	Mouthwash Tablets	3	—
	Seidlitz Powders	5	—
	Sodium Alginate	1	—
	Sun Lotion	1	—
	Sun Tan Cream	1	—
	Tannic Acid Suppositories ...	1	—
	Vitamin Preparations	1	1
	Witch Hazel	6	1
	TOTAL FOOD AND DRUGS ...	235	15

Details of the unsatisfactory samples are set out in the following statement :—

Formal Samples

<i>Reference No.</i>	<i>Sample</i>	<i>Nature of Adulteration</i>	<i>Action taken, etc.</i>
643	Chicken, Boned, Skinless	Low meat content (60 per cent.)	Warning letter to retailer.
804	Cream Bun	Contained imitation cream.	Vendor fined £20 with costs £8 8s. 0d.
281	Raspberry Vinegar	Deficient in acetic acid.	Retailer warned. Remainder of stock withdrawn from sale.
280	Witch Hazel	Deficient in boric acid.	Warning letter sent to vendor.

Informal Samples

<i>Reference No.</i>	<i>Sample</i>	<i>Nature of Adulteration</i>	<i>Action taken, etc.</i>
D 11	Chicken, Boned, Skinless	Meat content 65 per cent.	Stock cleared—unable to obtain formal sample.
J 10	Chicken in jelly Coffee	Incorrectly described. Contained rodent dropping.	do. In view of doubt as to how the contamination took place, no legal proceedings were taken.

<i>Reference No.</i>	<i>Sample</i>	<i>Nature of Adulteration</i>	<i>Action taken, etc.</i>
E 19	Cream Buns	Contained imitation cream.	Followed by a formal sample.
A 12	Cream Doughnuts	Contained imitation cream.	Followed by a formal sample.
G 20	Currants	Contained Sulphur dioxide.	Followed by a satisfactory formal sample.
D 21	Luncheon Meat	Low meat content (69 per cent.).	Followed by a formal sample.
H 13	Luncheon Meat	Low meat content (74 per cent.).	Followed by a satisfactory formal sample.
D 9	Madeira Wine Sauce	Rancid.	Remainder of stock surrendered.
G 40	Milk Loaf	Contained no milk fat and not more than 2 per cent. milk solids.	Warning letter to Vendor.
F 1	Prepared oranges	Contained crystals of calcium citrate.	No action taken.
G 14	Raspberry Vinegar	Contained 3.9 per cent. Acetic Acid B.P. Declared to contain 5 per cent. Acetic Acid B.P.	Followed by formal sample.
C 6	"Supavite"	Contained excess vitamin C and iodine. Deficient in iron.	Letter to Manufacturer.
C 18	Vinegar	Contained 3.15 per cent. acetic acid.	Followed by satisfactory formal sample.
G 17	Witch Hazel	Did not comply with B.P.C. requirements.	Followed by formal sample.

III. General Sanitation, Inspection of Shops and Factories and Miscellaneous Duties

a) Nuisances.

Complaints received and investigated	...	...	...	...	909
Statutory Nuisances found	...	...	...	...	593
Statutory Nuisances abated	...	...	...	...	554
Total Number of visits re the above	...	...	...	...	3193
Alleged nuisances from noise investigated pursuant to the provisions of the Noise Abatement Act, 1960, concerned 3 factories; the use of a radio set; barking of dogs at an animals' home; and a youth club.					

b) Drainage Work.

Visits to buildings in course of construction	...	...	...	...	3122
Tests applied to drainage at the above	...	...	...	...	2740
Defects found and remedied	...	...	...	...	426
Visits to existing buildings re drainage	...	...	...	...	815
Tests applied to drainage at the above	...	...	...	...	397

Defects found and remedied	399
Cesspools built	9
Cesspools abolished and drains connected to sewer	4
* Private sanitary surveys made for prospective purchasers of property	28
(Total amount received in fees—£96 12s. 6d.)	

* These surveys are made on payment of a fee to the Corporation, the scale of charges being as follows :—

	£	s.	d.
Rateable value of the property under £50	2	12	6
Rateable value of the property over £50 but under £250	3	13	6
Rateable value of the property £250 or over	6	6	0

(c) Refuse Accommodation.

Number of dustbins provided following informal action	182
Number of visits	280

(d) Disinfestation.

† Number of premises treated with insecticides	86
† Number of wasps' nests destroyed (at a charge of 7/6 per nest)	283
Number of inspections of verminous premises	83

(e) Notifiable Diseases and Disinfection.

Visits regarding enquiries	110
† Number of rooms treated with disinfectant :—	
(a) After notifiable disease	1
(b) After non-notifiable disease	4
(c) After tuberculosis	
Number of articles disinfected	11

† All this work was carried out by the Public Health Inspectors' Assistants.

Early in 1961, a disinfecting and cleansing station was completed on land at the rear of the Stokewood Road Baths. For this purpose, the steam disinfector was transferred from the Gloucester Road hospital. This provision now enables verminous persons and those affected with scabies to be treated with a minimum of delay in addition to the disinfection of bedding, clothing, etc.

(f) Rodent Control.

A Rodent Officer and four Operatives, all of whom are fully trained, are employed by the local authority in the control and extermination of rats and mice in Bournemouth.

There were no major infestations during the year, but 1,960 minor ones, due to rats, were found at

- (a) 1,782 dwellinghouses (mainly on land adjoining)
- (b) 102 business or other premises
- (c) 5 plots of agricultural land
- (d) 71 local authority properties comprising pleasure gardens, cliffs and refuse tips.

75 minor infestations by mice were found at

- (a) 53 dwellinghouses
- (b) 16 business or other premises
- (c) 6 properties owned by the local authority.

All these infestations were revealed during a total of 3,857 primary inspections and surveys made by the Rodent Officer and the Operatives following notifications to the Department.

“Warfarin” baits were laid with effective results and where conditions conducive to infestations were found, written warnings were sent to the persons concerned.

Although the Prevention of Damage by Pests Act, 1949 makes the owner or the occupier of infested land or premises responsible for exterminating the rats or mice thereon, the local authority has done this work free of cost to the persons concerned provided they co-operated. But a charge has been made in respect of the treatment of infested business premises. The total amount received in the year 1961 from this source was £295.

The total cost of this service to the rate-payers in the financial year 1960-61 was £3,225, an amount that could be reduced substantially if all concerned would faithfully observe the simple precautions of depriving the rodents of their supplies of food and their harbourages. Lidless dustbins ; accumulations of trade and garden refuse ; pig-sties and poultry houses that are not rat-proof ; missing air grates and badly-fitting doors are examples of conditions conducive to infestations.

Whenever necessary, the officials of the Pests Division of the Ministry of Agriculture, Fisheries and Food have given helpful advice.

(g) **Rag Flock and Other Filling Materials Act, 1951.**

The purpose of this Act is to ensure that only clean filling materials are used in the manufacture of bedding, furniture, baby carriages and soft toys.

During the year two annual licences were issued for the storage and sale of rag flock and at the end of the year seven upholsterers premises were registered, for the use of filling materials to which the Act applies. Seven inspections were made of these premises and the five samples of filling materials submitted for analysis were satisfactory.

(h) **Pet Animals Act, 1951.**

21 persons were granted annual licences to keep pet shops and the 62 inspections made of these premises revealed no contravention of the conditions attached to the licences.

(i) **Places of Entertainment.**

77 inspections were made of cinemas, theatres, church halls etc., in connection with the granting and renewal of licences and as a matter of routine to ensure that sanitary conveniences, dressing rooms, operating boxes, auditoriums and staff rooms were clean and well-ventilated. A high standard of hygiene is consistently maintained in Bournemouth's amusement places.

(j) **Atmospheric Pollution (*Clean Air Act, 1956*).**

There are two stations for the measurement of atmospheric pollution in Bournemouth. One is at The Herbert Hospital, Westbourne, and the other at the Corporation's Maxwell Road Depot. These stations comprise a standard deposit gauge for the collection of solid atmospheric impurities and rainwater, and a lead peroxide instrument for the estimation of sulphur dioxide in the atmosphere.

194 observations were made of industrial and commercial chimneys and 163 visits were made to premises in connection with the reduction of smoke emission. There were also 30 observations concerning an alleged nuisance from industrial dust.

The heights of nine industrial chimneys, as shown on plans deposited with the Council for Bye-law approval were sanctioned pursuant to the provisions of Section 10 of the Clean Air Act, 1956. Two further plans were approved after chimney heights had been amended by the Architects concerned. Before agreeing to such plans the local authority must be satisfied that the height of a proposed chimney is sufficient to prevent as far as practicable smoke, grit, dust or gases emitted from the chimney from becoming prejudicial to health or a nuisance.

(k) Piggeries and Farms.

92 inspections were made of piggeries to check waste food processing plants licensed under the Diseases of Animals (Waste Foods) Order, 1947, or to ensure that premises were in a sanitary condition, properly drained and free from rat infestation.

The few contraventions noted were remedied after informal action.

(l) Public Swimming Baths.

<i>Description of Swimming Bath</i>	<i>Capacity</i>	<i>Source of water used for filling</i>	<i>Method of treatment</i>	<i>Frequency of changing the water</i>	<i>Bacteriological examinations of water*</i>
Pier Approach (Owned by Local Authority)	150,000 galls.	Mains	Continuous filtration and chlorination	Every 2-3 years	Consistently good results.
Stokewood Rd. (Owned by Local Authority)	100,000 galls.	ditto	ditto	Every 3 years	ditto
Linden Hall (Privately owned)	60,000 galls.	ditto	ditto	Yearly	ditto

* 60 samples were taken from the above baths for bacteriological examination and all were found to be satisfactory, as were six samples taken for chemical analysis.

(m) Paddling Pools and Private Swimming Baths.

33 samples were taken from five paddling pools in the Borough and of these, eight were found to be unsatisfactory bacteriologically. Satisfactory repeat samples were obtained following chlorination.

29 samples were taken from swimming pools in five private establishments and in two schools. Satisfactory results were obtained in all but four instances.

Frequent checks for free chlorine content of the water are made by the Public Health Inspectors when sampling paddling pool and swimming bath waters.

(n) Fertilisers and Feeding Stuffs Act, 1926.

It does not appear to be generally known that persons selling fertilisers or feeding stuffs are required by the Act to give or display to the purchaser a statutory statement regarding these articles at the time of sale, or as soon as possible afterwards. Failure to do so can render a trader liable to a penalty. An offence is also committed if the composition of the article sold is found to vary beyond certain specified limits from the percentages declared on the statement.

Nine formal samples of fertilisers and three of feeding stuffs were sent to the Agricultural Analyst. These were satisfactory with two exceptions. A sample of bone meal was found to vary in composition beyond the limits permitted by the Act and the matter was referred to the Inspector for the County in which the fertiliser was manufactured. Follow-up samples taken at the manufacturer's premises were found to be satisfactory. Also, a sample of layers' mash was found to be deficient in fibre beyond the permitted limits of variation. This deficiency, however, was not to the prejudice of the purchaser.

(o) Merchandise Marks Act, 1926 and Agricultural Produce (Grading and Marking) Act, 1928.

No contraventions were found during routine inspections made to check the correct labelling of imported foodstuffs.

b) Pharmacy and Poisons Act, 1933 (Part II).

At the end of 1961 the names of 250 shop-keepers were entered in the local authority's list of persons (other than registered pharmacists) entitled to sell substances named in Part II of the Poisons list. Poisonous substances in everyday use, such as insecticides, weed killers, hair dyes and household articles such as ammonia and disinfectants are included in this list.

62 visits were made to enforce the requirements of the Act, but no contraventions were noted.

c) Shops Act, 1950.

384 inspections were made of shops to enforce statutory closing hours and the provisions of the Act controlling the working conditions of shop assistants. Suitable and sufficient lighting, ventilation, sanitary conveniences and ablution facilities are statutorily enforceable and appropriate notices relating to weekly half-holidays and the hours of employment of young persons must be displayed.

47 contraventions of the Act were found and 61 were remedied, some of these being outstanding from 1960. 15 informal notices were served. Generally speaking, a high standard of amenity is maintained in Bournemouth's shops and this includes those parts of the premises not normally seen by customers.

During 1961, the following Orders were made by the Council under the Act :—

- (1) An Order suspending the Bournemouth Weekly Half-holiday Order (Fish Friers) 1943 during the period 27th March, 1961 until 30th September, 1961, both days inclusive.
- (2) An Order permitting shops to open from 8 a.m. to 1.0 p.m. on each Sunday between 21st May and 17th September for the sale of :
 - (i) Articles required for bathing or fishing.
 - (ii) Photographic requisites.
 - (iii) Toys, souvenirs and fancy goods.
 - (iv) Books, stationery, photographs, reproductions and postcards.

- (3) An Order permitting retail trade or business to be carried on until 10.0 p.m. at the "Electricity in the Home" Exhibition held at the showrooms of D. & M. Cunningham Ltd., Seabourne Road, from the 2nd to the 10th of May 1961.

(r) **Young Persons (Employment) Act, 1938.**

32 visits were made in connection with the working hours of young persons, under the age of eighteen, employed as lift boys, bell boys, cinema projectionists, usherettes or junior receptionists at hotels.

3 contraventions of the Act were noted and these were remedied after informal action.

(s) **Prescribed Particulars on the Administration of the Factories Act, 1937.**

PART I of the Act.

- (1) Inspections for purposes of provisions as to health (including inspections made by Public Health Inspectors)

<i>Premises</i> (1)	<i>Number on Register</i> (2)	<i>Number of</i>		
		<i>Inspect- ions</i> (3)	<i>Written notices</i> (4)	<i>Occupiers Prosecuted</i> (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	153	717	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	638	31	24	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	—	2	—	—
TOTALS	791	750	24	—

(2) Cases in which DEFECTS were found.

Particulars (1)	Number of cases in which defects were found				No. of cases in which prosecu- tions were insti- tuted (6)
	Found (2)	Reme- died (3)	Referred		
			To H.M. Inspctr. (4)	By H.M. Inspctr. (5)	
Want of cleanliness (S.1)	13	13	—	2	—
Overcrowding (S.2.) ...	—	—	—	—	—
Unreasonable temperature (S.3.) ...	—	—	—	—	—
Inadequate ventilation (S.4.) ...	—	—	—	—	—
Ineffective drainage of floors (S.6.) ...	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient ...	—	—	—	—	—
(b) Unsuitable or defective	14	12	—	6	—
(c) Not separate for sexes	1	1	—	1	—
Other offences against the Act (not including offences relating to Out-work) ...	9	—	9	—	—
TOTALS	37	26	9	9	—

PART VIII of the Act.

OUTWORK

(Sections 110 and 111)

Nature of Work (1)	Section 110			Section 111		
	No. of out-workers in August list required by Section 110 (1) (c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failure to supply lists (4)	No. of instances of work in un-whole-some premises (5)	Notices served (6)	Prosecutions (7)
	(1)	(2)	(3)	(4)	(5)	(6)
Wearing apparel (Making etc.)	9	—	—	—	—	—
Curtains & furniture hangings	8	—	—	—	—	—
TOTALS	17	—	—	—	—	—

(t) **Legal Proceedings.**

The following legal proceedings were taken in 1961 :—

<i>Proceedings taken under</i>	<i>For</i>	<i>Result</i>
Food and Drugs, 1955	The sale of a pint bottle of milk containing a slug.	Fined £20 and £8 8s. 0d Advocate's Fee.
ditto	The sale of a mouldy Cornish Pasty.	Fined £7 10s. 0d. an £4 4s. 0d. Advocate Fee.
ditto	The sale of a cream bun which was not of the sub- stance demanded.	Fined £20.
ditto	The sale of a loaf of bread containing a finger dressing.	Fined £5 and Advocate's Fee £8 8s. 0d.
ditto	The sale of a bun containing stringlike material.	Fined £25. £2 2s. 0d. costs.

(u) **Public Conveniences.**

During 1961, a sum of £14,103 14s. 4d. was collected by the Superintendent and his assistant from the 189 public conveniences in the Borough.

This amount was made up as follows :—

<i>Source</i>	<i>Amount</i>
	£ s. d.
Coin-locks	13,347 7 6
Wash and brush-up rooms	490 10 10
Paper towel dispensers	116 15 11
"Brylcream" dispensers	12 18 6*
Perfume and hand-lotion dispensers ...	136 1 7*

* These amounts are a quarter of the total receipts, the balance being paid to the firms operating the machines.

Other items concerning the Public Conveniences are as follows :—

- (a) The conveniences for both sexes at Boscombe Gardens (Sea Road) were demolished in connection with the Boscombe Pier Approach reconstruction.
- (b) The new conveniences at Boscombe Pier for both sexes and a new convenience for males at Boscombe Crescent were opened during the year.
- (c) The main improvements effected at public conveniences during 1961 were :—
 - (i) Floor tiling at five conveniences.
 - (ii) Roof lights fitted at three conveniences.
 - (iii) Conversion from gas to electric lighting at Boscombe Cliff Gardens.
 - (iv) The installation of a water heater at the ladies' convenience at Boscombe Crescent.
 - (v) The provision of an attendant's room at the ladies' convenience in Avenue Road Car Park.
- (d) 47 incidents involving damage and/or theft at various conveniences were reported to the Police.

One person was prosecuted for wilful damage to the Public Conveniences at Moordown. He was fined £3 and ordered to pay 8s. 0d. compensation.

- (e) 48 articles of lost property left in various public conveniences in the Borough were dealt with during the year.



COUNTY BOROUGH OF BOURNEMOUTH

EDUCATION COMMITTEE

Annual Report

of the

Principal
School Medical Officer

Year 1961



GOVERNMENT OF INDIA

MINISTRY OF EDUCATION

Annual Report

1954-55

Director, Central Board of Secondary Education

1955

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in submitting my eighth Annual Report as Principal School Medical Officer to the Education Committee, the fifty-fourth of a series dealing with the health of children attending your schools.

There were no serious problems during 1961, and with the exception of measles, infectious disease was uncommon.

The general physical condition of the schoolchild of today has never been higher, but the earlier age of physical maturity brings complications during school life rather than later. Emotional instability appears to be increasing, as judged by the numbers attending the Child Guidance Centre, and although these numbers are small in relation to the total school population, they must be a cause of deep concern to parents and teachers.

It is to be hoped that the Education Committee's plans for the development of Child Guidance services and a larger Day Unit for Maladjusted Children on an alternative site will be implemented without undue delay.

There is still a considerable delay in providing residential school places for the comparatively few handicapped children requiring them. These schools are often situated far from Bournemouth, and difficult of access to the parent who wishes to visit regularly, and delay in finding a placement frequently builds up resistance which prevents the full benefit being obtained from these specialised establishments.

There have been no serious staffing problems during the year, and my thanks are due to all members of the School Health Service and to the Headteachers of your Schools for their co-operation.

I am,

Yours faithfully,

WILLIAM FIELDING

SCHOOL HEALTH SERVICE STAFF.

(As at 31st December, 1961).

Principal School Medical Officer :

WILLIAM FIELDING, M.D., B.Sc., D.P.H.

Deputy Principal School Medical Officer :

E. W. WRIGHT, M.B., CH.B., D.P.H.

School Medical Officers :

CICELY R. HAINES, M.B., CH.B., D.R.C.O.G.

FRANZ A. HEIMANN, L.R.C.P., L.R.C.S., L.R.F.P.S., M.D.(Breslau)

PAULINE K. KEATING, L.R.C.S.(I), L.R.C.P.(I), L.M., D.C.H.

Principal School Dental Officer :

A. A. WOOD, L.D.S., R.C.S.

School Dental Officers :

M. GARDENER, L.D.S., R.C.S. (Part-time)

H. S. HOOPER, B.D.S., L.D.S., R.C.S.

F. E. LOCKWOOD, B.D.S. (Univ. L'pool)

M. B. REDFERN, L.D.S. (Part-time)

Dental Attendants :

H. ALLEN, D. M. COX, F. R. HICKMOTT, B. M. READ

Consultant Children's Psychiatrist (Part-time) :

*J. STIRRAT, M.B., CH.B., D.P.M.

Educational Psychologists :

B. WORTHINGTON FOXLEY, B.Sc.(Hons.), P.G.A.D.P.

J. A. COWELL, B.Sc.

Psychiatric Social Worker :

H. S. LOVEJOY

Ophthalmic Surgeon (Part-time) :

*J. WHITWELL, M.B., M.S.(LON.), D.O., F.R.C.S.

Orthoptist (Part-time) :

*A. P. FIELD, D.B.O.

* Employed by the Wessex Regional Hospital Board.

Orthopaedic Surgeons (Part-time) :

* Services provided by Surgeons from the Royal Victoria Hospital,
Boscombe.

* *Physiotherapist-in-charge :*

E. O. JOSEPH, M.C.S.P.

* *Assistant Physiotherapists :*

L. BARNETT, M.C.S.P.

M. HUGHES, M.C.S.P.

Speech Therapist :

V. ABELSON

Superintendent Health Visitor and School Nurse :

E. M. LEAHY

Health Visitors and School Nurses :

M. ABLETT

G. M. LUNN

K. H. BEAUMONT

M. MANSON-BAHR

D. J. BLACKMORE

A. MORTON

D. E. BLUNDSTONE

J. MULLIGAN

P. M. CAREY

M. PEAKMAN

F. DARLINGTON

N. E. SMITH

M. E. DAVIES

G. N. SUCKAMORE

M. J. GROSVENOR

M. TRATSART

A. JOHNSON

J. WILKINSON

B. LEADBITTER

Clerk in charge of School Health Service Section :

F. J. GOODE

Clerks :

E. G. PAYNE, J. W. PEAKE, B. TARRANT

J. WHITE (Child Guidance Centre)

SCHOOLS AND SCHOLARS

Number of Primary Schools ...	...	...	...	32
Number of Secondary Modern Schools	...	...	...	11
Number of Secondary Grammar Schools	...	...	...	2
Number of Special Schools ...	...	...	...	1
Average attendance ...	...	...	...	15,386
Average number on School Registers	...	...	...	16,804

MEDICAL INSPECTION

There have been no changes in the general pattern of medical inspection described in the Annual Report for 1960.

Experience over several years has shown that the selective Intermediate Examination has many advantages over the routine examination of all children in this age group and is moreover popular with parents and school staffs.

Comparatively few children are now seen with serious or crippling defects unknown to their parents and family doctors, and it would seem that there is room for further experiment in the field of selection, which while not saving any great amount of medical officers' time, would ensure a far more thorough investigation of those children known or suspected to be "at risk".

TABLE SHOWING THE NUMBER AND NATURE OF THE DEFECTS FOUND DURING EXAMINATION OF CHILDREN IN THE PRESCRIBED AGE-GROUPS AND OF OTHERS "PERIODICALLY INSPECTED".

DEFECTS	Children Aged 5 1,154		Children Aged 10 562		Children Aged 14 1,618		Other Periodic Inspections 1,401	
	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation
Skin	15	3	9	—	48	2	44	9
Eyes :—								
(a) Vision	24	2	58	1	253	2	269	5
(b) Squint	30	—	5	—	10	—	15	—
(c) Other	11	1	7	14	12	—	7	2
Ears :—								
(a) Hearing	2	2	10	—	9	—	3	—
(b) Otitis Media	—	—	2	—	1	—	1	—
(c) Other	—	1	1	—	—	—	2	1
Nose or Throat	23	121	10	9	4	24	18	65
Speech	21	1	6	2	3	—	7	8
Glands	—	19	—	2	—	—	—	8
Heart	—	14	—	4	2	7	3	7
Lungs	7	8	1	4	4	—	1	3
Developmental :—								
(a) Hernia	1	—	—	—	2	—	—	—
(b) Other	3	8	3	6	4	14	2	11
Orthopaedic :—								
(a) Posture	13	11	5	1	61	40	35	12
(b) Feet	32	17	30	2	38	25	35	6
(c) Other	12	5	11	—	13	—	12	3
Nervous System :—								
(a) Epilepsy	2	—	2	—	1	—	—	—
(b) Other	—	—	—	—	—	—	—	—
Psychological :—								
(a) Development	5	25	8	11	3	2	11	4
(b) Stability	1	—	4	1	—	—	1	—
Abdomen	—	—	—	—	—	—	—	—
Other	—	—	—	—	—	—	—	—
	202	238	172	57	468	116	466	144

FINDINGS ON MEDICAL INSPECTION

(a) *Uncleanliness.*

Cases of personal uncleanliness have shown a surprising uniformity during the last few years, 46 in 1959, 63 in 1960, and 58 in 1961. They were mainly found among the hard core of "problem families" where the hygienic standard of all members was low, and many of the children were persistent offenders who have been picked out at inspections time and time again.. Fortunately the great majority of school children now exhibit a very high standard of cleanliness and care and there is no evidence that the few delinquents are likely to spread the condition.

(b) *General Condition.*

Only 5 children seen in 4,738 routine medical examinations were considered to be of "unsatisfactory" physique. There are few, if any, schoolchildren nowadays suffering from malnutrition, the few who are classified as "unsatisfactory" being usually children debilitated by illness.

(c) *Minor Ailments.*

The number of minor ailments treated during 1961 fell from 375 to 326, but a fruitful liaison is maintained by the School Nurses with the Headteachers in these areas through the agency of the Clinics.

(d) *Defective Vision.*

Schoolchildren discovered at routine examination to suffer from defective vision were slightly more numerous than in 1960, 7.8 per cent. compared with 7.5 per cent. The Consultant Ophthalmic Surgeons of the Wessex Regional Hospital Board continued to provide an excellent service of four special clinics per week, two at Avebury, one at Pokesdown and one at West Howe.

During the year 1,564 children attended the Eye Clinics and spectacles were prescribed in 675 cases. Of children attending for the first time spectacles were prescribed in 206 of 353 cases.

No cases came to light during the year where parents resisted the idea of operative or other treatment recommended in the children's interests.

The Orthoptic Clinic at Avebury dealt with 36 new cases during the year, and 810 attendances were made by new and old cases. Sixteen cases of squint received operative treatment, but cases are still being discovered too late to preserve full visual acuity.

(e) *Defects of the Nose and Throat.*

286 children received treatment for enlarged tonsils and adenoids compared with 260 in 1960.

(f) *Treatment of Children in Hospital.*

The following information is given from hospital discharge reports received during the year :—

<i>Group of Diseases</i>							<i>No. of Children</i>
Infections or Parasitic Diseases	...	...	...	...	...	...	12
Neoplasms (a) Benign	...	...	...	...	...	...	1
(b) Malignant	...	...	...	...	...	...	—
Allergic, Endocrine, Metabolic and Nutritional	...	...	...	...	...	...	—
Diseases of blood and blood forming organs	...	...	...	...	...	...	3
Mental, Psychoneurotic	...	...	...	...	...	...	—
Diseases of Nervous System and Special Senses	...	...	...	...	...	...	51*
Diseases of Circulatory System and Lymphatics	...	...	...	...	...	...	9
Diseases of Respiratory System	...	...	...	...	...	...	302†
Diseases of Digestive System	...	...	...	...	...	...	94
Genito-Urinary System	...	...	...	...	...	...	18
Skin and Cellular Tissues	...	...	...	...	...	...	8
Bones, etc.	...	...	...	...	...	...	209
Accidents, Poisoning and Violence	...	...	...	...	...	...	194

*Includes 16 operations for "squint".

†Includes 286 cases for tonsillectomy.

MINOR AILMENTS CLINIC

As recorded on previous occasions, these Clinics show a gradually declining use as the years go by, but particularly when they are located on school premises they give the doctor or nurse an opportunity of discussing children and their problems with the Head Teacher on the spot, and in this way retain some of their former value.

During the year a total of 2,258 attendances were made at Minor Ailments Clinics.

LIST OF CLINICS HELD FOR SCHOOL CHILDREN

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Minor Ailments Clinics.					
East Howe : Hadow Road ...	MORNING	—	—	—	MORNING
Charminster : East Way ...	AFTERNOON	—	—	MORNING	—
Kinson : C.P. School, School Lane ...	—	—	—	MORNING	—
West Howe : Cunningham Crescent	MORNING	—	—	MORNING	—
Dental Clinics.					
Central : 10, Madeira Road ...	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON
East Howe : Hadow Road ...	Do.	Do.	Do.	Do.	Do.
Pokesdown : 896, Christchurch Road	Do.	Do.	Do.	Do.	Do.
Winton : 19, Cranmer Road ...	MORNING	Do.	MORNING	MORNING	MORNING
Eye Clinics.					
Central : 10, Madeira Road ...	AFTERNOON	—	—	—	MORNING
Pokesdown : 896, Christchurch Road	—	—	—	MORNING	—
West Howe : Cunningham Crescent ...	—	AFTERNOON	—	—	—
Child Guidance Centre.					
896, Christchurch Road, Pokesdown	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON

Children's Orthopaedic Clinic. { Surgeon's sessions—Friday Mornings
 70, Stewart Road Physiotherapy—daily by appointment.

ORTHOPAEDICS

The general arrangements for children with orthopaedic defects have remained as before, a weekly out-patient session being conducted at the Stewart Road Clinic by one of the Consultant Orthopaedic Surgeons of the Wessex Regional Hospital Board. A physiotherapist with all necessary equipment, is available whole-time at the Clinic.

During the year, 10,102 attendances were made, an increase of 30 over 1960. 410 children attended for individual treatment and 108 children for class treatment.

In all, 718 patients were in attendance at the Clinic, of whom 118 were new cases during 1961, some being referred for treatment by the School Medical Officers, others being seen by the Orthopaedic Surgeon.

As will be noted from the details below, nearly 57 per cent. of cases seen by the Orthopaedic Surgeon were foot defects, and of the 110 cases

180 were Primary School children
106 were Secondary School children
24 were Grammar School children.

The increasing use of the Clinic over the past few years has led to a considerable amount of congestion, and although the premises themselves do not allow of any expansion, a small store for wheel-chairs and equipment in only occasional use has been added.

Details of attendances for the past year are as follows :—

Number of scholars seen by the surgeons	...	...	...	545
Number of new cases	...	...	...	228
Total number of attendances	...	...	...	884
Number of cases discharged	...	...	...	207

Defects found.

Genu Valgum/Genu Varum and other knee defects	...	132
Spastic conditions	...	9
Due to Anterior Poliomyelitis	...	7
Spinal Curvature and Poor Posture	...	33
Torticollis	...	4
Deformities of the foot	...	310
Other conditions	...	50

SPEECH THERAPY

For a good many years the number of children suffering from defective speech has been second only to educational subnormality and has comprised over 30 per cent. of all handicapped children on the Register.

The one Speech Therapist employed by the Education Committee has had 156 cases under treatment during the year, including a number attending the Training Centre for mentally subnormal, on home teaching, or not attending school for some reason, and efforts have been made over a long period to provide additional part-time therapy. These efforts were unsuccessful until 1962 when an experienced speech therapist was appointed for four sessions per week to carry out a school survey and to take over some of the more difficult treatment cases.

B.C.G. VACCINATION

B.C.G. vaccination was offered to children born in 1948 and coming within the Ministry Scheme, with the following results :—

Children born in 1948—

Tuberculin tested	...	...	1526
Positive (12.25%)	...	...	187
Vaccinated	...	...	1313

CHILD GUIDANCE

The general arrangements for providing a Child Guidance Service have remained unchanged, but early in 1962 a second Psychiatric Social Worker was appointed for full-time duty at the Child Guidance Centre, and the staff now consists of a Consultant Children's Psychiatrist (6 sessions per week), two Educational Psychologists, a senior Psychiatric Social Worker (half-time), and a Psychiatric Social Worker (full-time).

As Dr. Stirrat notes in her report for 1961, the number of new cases referred during the year increased by 48, reaching a total of 189, and the number of cases awaiting preliminary investigation

Psychiatric investigation and treatment gives rise to increasing concern.

Reference is also made to the unsatisfactory premises at Westbourne, which make good quality work extraordinarily difficult, and it is hoped that negotiations for alternative accommodation for a Child Guidance Centre and Day Unit in Westbourne will soon reach a successful conclusion.

Detailed statistics are given of the work carried out by the Centre during the year, but as it is often difficult for members of the Committee to appreciate the type of case referred, a series of brief case reports have been included, showing some of the background factors associated with emotional disturbance in children.

CHILD GUIDANCE CENTRE

The number of new cases referred shows an increase of 48 over last year's figure and this rise is reflected in the number of those awaiting psychiatric investigation and treatment. It has become increasingly apparent that there is a real need for extension of treatment facilities such as the part-time services of a Registrar and Therapist.

The Day Centre for Maladjusted Children is proving to be a most valuable development. There is no doubt that this Centre with its specialised individual approach is of great benefit to a wide range of emotionally disturbed children.

It is worthy of note that this year only 4 children had to be commended for residential placement, compared with 10 last year.

During the year the need for improved premises became acute. Shortage of rooms prevented the best use being made of clinical facilities. The appointment of an additional Psychologist had already aggravated the inadequate accommodation, and when the vacancy for a second Psychiatric Social Worker is filled, the position will be even more unsatisfactory. It is hoped that the proposed plan for further development will not be long delayed.

This year has also seen the growth of educational and teaching functions in the Clinic. Two students from the Course in Social

Casework in Southampton University have received part of their practical training under the supervision of the Senior Psychiatric Social Worker, and they have made a distinct and valued contribution to the work of the Clinic. Weekly Case Conferences have been well attended by General Practitioners, School Medical Officers, Head Teachers, Probation Officers, Health Visitors and representatives of social agencies interested in the welfare of children. It is felt that this Conference is a direct contribution to the understanding of mental health problems in the wider community.

JEANNIE STIRRAT,

Consultant Children's Psychiatrist

ANNUAL RETURNS FOR YEAR ENDING 31st DECEMBER, 1961

Total new cases referred ...	...	...	...	...	...	...	189
Total new cases seen ...	...	...	...	...	...	...	121
Total cases uneventuated	...	...	...	...	...	...	31
Total cases closed ...	...	...	...	...	...	...	126
Total cases re-opened ...	...	...	...	...	...	...	16
Total open cases on 31.12.61	...	...	...	...	...	...	281
Total cases awaiting preliminary investigation—31.12.61	...	...	...	...	...	...	39
Total cases awaiting psychiatric investigation—31.12.61	...	...	...	...	...	...	5
Total number of children seen during year 1961	...	...	...	...	...	...	289
Residential treatment in school or hospital advised	...	...	...	...	...	...	4
Treatment waiting list ...	...	...	...	...	...	...	27

Source of Referrals

School Medical Officers	...	...	...	...	...	...	...	68
General Practitioners	...	...	...	...	...	...	...	53
Children's Officer	...	...	...	...	...	...	...	4
Head Teachers	...	...	...	...	...	...	...	23
Probation Officers	...	...	...	...	...	...	...	7
Parents	...	...	...	...	...	...	...	16
Other agencies	...	...	...	...	...	...	...	12

189

Age Groups of Referrals

Pre-School	...	...	...	...	...	...	...
Primary School	...	...	...	...	...	...	...
Secondary Modern School			...	...	...	...	...
Grammar School	...	...	...	...	...	...	...
Left School	...	...	...	...	...	...	...

189

Outcomes

Advice only	...	...	...	...	...	...	...	7
Satisfactory adjustment after treatment	...	...	...	...	...	...	...	24
Improved	...	...	...	...	...	...	...	52
Transferred to other agencies	...	...	...	...	...	...	...	23
Removed from area	...	...	...	...	...	...	...	5
Inco-operative	...	...	...	...	...	...	...	11
No change	...	...	...	...	...	...	...	4
								<hr/> 126 <hr/>

Reasons for Referral

Behaviour difficulties	...	...	...	...	...	...	...	126
Educational problems	...	...	...	...	...	...	...	27
Psychosomatic symptoms	...	...	...	...	...	...	...	29
Speech problems	...	...	...	...	...	...	...	3
Psychotic children	...	...	...	...	...	...	...	2
Advice only	...	...	...	...	...	...	...	2
								<hr/> 189 <hr/>

Causative factors in emotionally disturbed children.

<i>Child</i>	<i>Age</i>	<i>Symptom</i>	<i>I. Q.</i>	<i>Factors</i>
Boy	10	Stealing, bad language.	135	Disturbed family background ; parental disharmony ; F. undermines Mother's attempt to manage children ; Mother dominant, intelligent and ambitious ; parental disparity in social status.
Boy	13	Stealing from home (£20 from brother's savings, etc.)	73	Eighth child in family of nine, youngest a foster child and then adopted : Mother paid more attention to this younger child, with resultant longstanding jealousy situation.
Girl	10	Temper, unpopular with other children, parents and teachers puzzled by her behaviour ; withdrawn and unhappy.	134	Poor physical health complicated by meningitis at 6 ; and consequent uncertainty in parental handling ; jealousy of younger sister.
Girl	12	Educationally backward.	74	Crippled leg from birth ; off school for long periods (operations in hospital ; "bundle of nerves" while there), otherwise described as "a lovable little soul". Shortcomings emphasised by younger brother being good at school. ("A" stream).

<i>Child</i>	<i>Age</i>	<i>Symptom</i>	<i>I. Q.</i>	<i>Factors</i>
Girl	10	Highly nervous; full of fears; difficulty about going to school.	121	Parents married late, older sister 13 born when Mother 43. Father now 62 retired at 41. Rivalry with older sister; attended Private Girls' School; despite good intelligence failing in school work. Mother a school teacher.
Boy	4	Speech difficulties.	85	Constitutional factors; Mother slow in talking; paternal grandparents had congenital deafness. Mother anxious lest difficulty associated with other mental limitation.
Boy	15	Stealing from shops and home.	110	Adopted child with adopted younger sister. Parents struggling to maintain middle class standards. Mother suffering from slowly progressive muscular illness. Inclined to be solitary—a reflection of the family's social isolation.
Boy	5	Frequent absence from school.	93	Both parents extremely inadequate personalities; Father had psychiatric treatment and has not worked for some years. Mother, very emotional, suffering from nervous exhaustion. At time of referral greatly distressed by behaviour of inquisitive neighbour.
Boy	3	Difficult behaviour; bed wetting; temper tantrums.	105	Illegitimate; Mother hoped to marry Father after divorce but Father recalled to his own country. Younger sister (legitimate) and child in legal custody of ex-husband. Mother very unsettled as to her future and the child's.
Girl	12	Awkward behaviour; resentful and antagonistic towards others; out of control at home.	98	Mother deprived childhood spending part of the time in an orphanage; Mother therefore lacking in warmth and this has perpetuated the natural rebellion.
Boy	12	Severe school phobia; stays in bed, refuses to go to school.	100	Parents living apart: Father previously in prison for indecent assault; many rows at home; Mother out working and boy left for long periods on his own.
Girl	14	Before Court as beyond control of Mother; truantiing.	115	Greatly upset by Father's death when she was 11, being devoted to him; Mother unsure in her handling following Father's death.

<i>Child</i>	<i>Age</i>	<i>Symptom</i>	<i>I. Q.</i>	<i>Factors</i>
Boy	10	Pilfering and bedwetting.	99	Parental friction ; Father not much time for the children ; Mother feels inadequate in her role as mother ; lack of consistent discipline in the home. Both parents emotionally unstable.
Girl	6	Difficult to handle ; temper, tantrums, ; anxious and fearful.	101	Parents very unsure in their handling of the girl ; anxiety increased by earlier poor physical health of the child.
Boy	6	Night terrors ; waking in the night in an agitated state.	96	Mother from very poor home background ; unable to manage children and home adequately ; Mother's immaturity and mental ill health a strain on both marriage and children.
Boy	12	Reluctance to go to school ; behaviour difficulties	102	Mother poor manager at home—always in arrears financially ; Mother excessively devoted to severely subnormal younger girl. Father's attitude defeatist to the general home situation ; Probation Officer helping over debts.
Boy	10	Temper tantrums ; night fears ; undescended testicles ; obesity.	95	Mother presented as superficially competent but insecure underneath ; Father suffers from ill health and may have to give up employment ; Boy suffered from a number of physical illnesses as a child. Mother anxious over implied loss of masculinity.
Boy	14	Adolescent sexual difficulties.	103	Father suffers from anxiety neurosis ; Mother a teacher and taught full time when Father ill when boy $2\frac{1}{2}$ until 5. Boy has seriously impaired eyesight ; also stammered ; two older sisters tended to be critical of him.
Girl	15	Pain in right foot—? neurotic.	94	Mother vague and disorganised person ; Father irresponsible and abnormal sexually ; left before child born ; Mother herself walked with a stick. Girl suffered from poor health as a child ; emotional disturbance due to hospitalisation at 5 when Mother could not visit. Condition aggravated by cramped home conditions.
Girl	14	Blackouts and hysterical paralysis of legs	104	Both parents inadequate and over-protective of this only child ; Father brought up in an orphanage ; Child dominated home.

<i>Child</i>	<i>Age</i>	<i>Symptom</i>	<i>I.Q.</i>	<i>Factors</i>
Boy	13	Difficult behaviour—aggressive and defiant towards foster parents ; history of emotional disturbance.	93	Own Mother deserted family when child 18 months' old ; child in care since then ; decision by Mother has affected his attitude to women.
Boy	13	Severe anxiety ; gasps and has choking sensations ; fear of harm coming to his parents.	105	Buried up to his neck in a pile of coke at the age of 5. Both parents anxious—Mother has been in Mental Hospital. Nervous handling by parents.
Boy	7	Stealing small items — toys, etc.	92	Very strained marital situation. Father dislikes boy, beats him and has denied paternity on occasions.
Boy	7	Poor progress at school ; emotionally retarded.	106	No early mothering as Mother ill ; in early childhood Mother preoccupied with family business worries ; Mother former teacher and had too high expectation of child's scholastic achievement. Some tension between the parents.
Boy	8	Wandering ; tempers ; sadistic behaviour ; wetting and soiling.	91	Father deserted family when boy 4 ; a persistent drunkard ; delinquent tendencies in brothers and sisters. Mother's handling unstable.
Girl	10	Behaviour problems at home — defiant and wilful.	107	Mother anxious and uncertain in handling and this aggravated by Father's moodiness.
Girl	14	Nervousness and acute fears of being alone ; return to childish habits.	89	Professional family where the child's limited intelligence is a severe handicap ; two elder sisters successful academically.
Boy	13	Bedwetting.	108	Adopted child with feelings of rejection due to adoption. Adoptive Mother restrictive in the past.
Boy	10	Stupid behaviour ; lying and aggressive.	87	In children's home ; Mother's unfaithfulness and desertion broke up family. Mother mentally unstable. Father later divorced Mother. Boy pathologically devoted to his possessions.
Boy	9	Stealing at home ; disobedience at school ; fears and nightmares, asthma and eczema.	109	Mother uncertain in her handling of her children. Emotional separation for operation (at 4 years). Parents disagree over management of boy. Mother has tried to force him to overcome his fears.

IMMUNISATION AGAINST INFECTIOUS DISEASES

Arrangements have continued for the protection of school-children against diphtheria, whooping cough, tetanus, poliomyelitis, smallpox and tuberculosis, and although it is difficult to maintain a high level of protection against diseases that have become relatively uncommon, it is only by continued efforts that these diseases will be eradicated.

The diphtheria index rose from 30.1 per cent. to 35.76 per cent. 329 pupils received a re-inforcing dose during the year, and 312 others not previously immunised received their first course.

During the year, 1,313 schoolchildren received B.C.G. vaccination against tuberculosis under the Ministry's Scheme and 44 under the "contact" scheme.

NOTIFICATION OF INFECTIOUS DISEASES

The following relate to school children :—

Scarlet Fever	...	...	...	...	12
Measles	...	...	...	...	1138
Whooping Cough	...	...	...	...	43
Dysentery...	...	...	...	...	2
Food Poisoning	...	...	...	...	1
Pneumonia	...	...	...	...	2
Encephalitis	...	...	...	...	1
					<hr/>
					1199
					<hr/>

There was also 1 notification of respiratory tuberculosis.

FOLLOWING UP

Most valuable work is done by the school nurses in the general follow-up of children found to have defects or who have recently been ill. By home visits the nurse is able to give helpful advice to the parent and can satisfy herself that treatment has been sought from the general practitioner and his advice carried out.

The School Nurses recorded the following reasons for home visits :—

	<i>No.</i>
Eye Defects	161
Ear, Nose and Throat conditions	43
Skin complaints	78
Uncleanliness	106
Miscellaneous	587
	<hr/>
	975
	<hr/>

Exclusion from School

Scholars were excluded from school during 1961 for the following reasons :—

Uncleanliness	3
Eye conditions (Post-op.) ...	5
Miscellaneous	3
	<hr/>
	11
	<hr/>

Open Air Education

During the year 4 boys and 5 girls were sent to residential open-air schools, compared with 6 boys and 7 girls in the previous year.

Most of the children were suffering from general or nervous debility, sometimes complicated by asthma, and a few terms at an open-air school were often sufficient to enable them to return to an ordinary school.

SCHOOL MEALS SERVICE

32 Centres are provided for the provision of meals and the number of children attending on an average day in September was 8,363 out of 15,824 children attending school that day. 449 of the meals were provided free. On the same day, 12,105 children received milk in school (one-third pint each).

STAFF EXAMINATIONS

72 school teachers were examined by the medical staff, as a condition of appointment, also 68 applicants for entry to Training Colleges. In addition, 26 students were examined on completion of their course at the Bournemouth Municipal College of Art.

EMPLOYMENT OF SCHOOL CHILDREN

A total of 758 children aged 13 or more who wished to be employed outside school hours were medically examined by the School Medical Officers. All except one were found fit for the purpose. The occupations proposed were :—

Errand Boys	...	...	...	35
News boys	...	...	...	458
News girls	...	...	...	136
Shop assistants	...	...	...	101
Other	...	...	...	27

1 other child was granted a medical certificate as being fit to take part in public entertainment.

HANDICAPPED CHILDREN

The number of handicapped children on the Register remained practically constant, a total of 417 children (2.48 per cent. of the average number on the school registers) being placed in this category compared with 424 in 1960.

In order of frequency, the disabilities were as follows :—

Educationally subnormal	...	...	159
Defective speech	...	...	126
Physically handicapped	...	...	34
Maladjusted	...	...	30
Partially deaf	...	...	26
Delicate	...	...	22
Partially blind	...	...	7
Epileptic	...	...	6
Blind	...	...	4
Deaf	...	...	3

417

HANDICAPPED PUPILS

Category	Ascertainment		Special Schools*			
	New Cases Ascertained During 1961	Number on Register, 31.12.61	Number Recommended During the Year for Admission	Number Admitted During the Year	Number Attending 20.1.62	Number Awaiting Placement 20.1.62
Blind ...	—	4	—	—	4	—
Partially Sighted ...	2	7	1	2	5	—
Deaf ...	—	3	—	—	2	—
Partially Deaf ...	6	26	—	—	6	—
Delicate ...	9	22	6	9	7	—
Physically Handicapped ...	7	34	3	2	7	—
Educationally Sub-normal ...	56	159	28	55	103	4
Maladjusted ...	7	30	3	—	9	7
Epileptic ...	1	6	1	1	2	—
Speech Defective ...	47	126	—	—	—	—
Total ...	135	417	42	69	145	11

* Includes boarding houses or hostels and independent schools : excludes Hospital Schools.

Number of Handicapped pupils being educated under arrangements made under Section 56 of the Education Act, 1944 17

Number of children reported under Section 57 (4) of the Education Act, 1944 11

Annual Report

on the School Dental Service—1961

General Observations

The object of the school dental service is to ensure that as many pupils as possible leave school with their teeth and gums in a sound condition, that they regularly practise oral hygiene and have knowledge of the care of the teeth.

The dental care which children receive during school life is an important factor in maintaining their general health and so they are able to gain more from their education. The dental treatment given to children must be carried out in a careful and kindly manner and this is of the greatest importance.

Whilst our chief object is the conservation of teeth, the elimination of sepsis and the relief of pain is also a necessary part of the work.

Complete dental treatment for every child under our care is offered and it is fortunate that parental prejudice against fillings is now much more infrequent than in the past, and there are relatively few children in the Borough who fail to have dental treatment when necessary either through the General Dental Service or at one of the clinics.

Every opportunity has been taken to give advice on the care of the teeth to children and parents. Whilst attending to a child's teeth a little extra time spent in this way will help to minimize dental trouble in future years and although this reduced to some extent the statistical output of work, from a preventive aspect much will be gained.

Staffing Position

During the year 1961 three full-time and two part-time dental officers were employed, each was helped by a dental surgery assistant and was also engaged in the Maternity and Child Welfare Dental Service.

We were again unable to appoint a full-time dental officer at the Winton Clinic, due to the scarcity of suitable applicants for the position, and the shortage of dentists throughout the British Isles gives serious cause for concern.

Fortunately Mrs. M. Redfern continued to give her excellent services for five mornings each week and this was supplemented by the part-time help of one to two sessions weekly by Mr. M. Gardener, a most efficient and kindly dental surgeon who began his duties on the 15th August.

Co-operation of Teachers

We were always made welcome and granted every facility when we visited the schools to carry out the dental inspections of the pupils. The teachers were also most helpful in encouraging the children to take care of their teeth and to keep their appointments at the clinics.

I would like to record my grateful appreciation of the kindly co-operation afforded by headmasters, headmistresses and teachers.

In many of the schools films or film strips were used to illustrate the lessons about dental health given by the teachers.

Orthodontic Treatment

There was close co-operation with Mr. J. D. Hooper, the Orthodontic Consultant at the Royal Victoria Hospital, Boscombe. Thirty-one children were referred for an opinion and fifty-one children for diagnosis and treatment.

As in previous years the school dental officers treated those cases which were within the range of their abilities and details of this work are included in the statistical part of this report.

Mr. Hooper afforded very valuable help and many children derived great benefit from his skill and experience.

Dental Inspections at Schools

All the schools except four were visited by the dentists during the year for routine dental inspection of the pupils and it was found

at approximately forty-nine per cent. of the children inspected were having regular treatment under the General Dental Service, this representing an increase of about six per cent. over the previous year.

The school dentists visited South Kinson Infants' and Manchester County Secondary Schools twice during the year resulting in the re-inspection of seven hundred and twenty-seven pupils.

Co-operation of Boscombe Hospital Staff

I should like to thank all those members of the staff of the Royal Victoria Hospital, Boscombe, who kindly gave their help during the year.

Refresher Course

I very much appreciated the privilege of attending a refresher course which was held under the auspices of the Dental Group of the Society of Medical Officers of Health in London on the 28th and 29th of April. The theme of the course was children's dentistry and I was able to be present at several most useful and stimulating lectures, discussions and films.

A. A. WOOD.

Medical Inspection Returns

Year Ended 31st December, 1961

TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

A—PERIODIC MEDICAL INSPECTIONS.

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of Col. 2	No.	% of Col.
		(3)	(4)	(5)	(6)
1957 and later	16	16	100	—	—
1956	1154	1154	100	—	—
1955	219	218	99.54	1	0.46
1954	76	76	100	—	—
1953	29	29	100	—	—
1952	54	54	100	—	—
1951	562	562	100	—	—
1950	274	274	100	—	—
1949	38	38	100	—	—
1948	191	191	100	—	—
1947	1618	1614	99.75	4	0.25
1946 and earlier	504	504	100	—	—
Total	4735	4730	99.89	5	0.11

-PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS

(excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (By year of birth)				For defective vision (excluding squint)	For any of the other conditions recorded in Table II	Total individual pupils
(1)				(2)	(3)	(4)
1957 and later	...	...	...	—	10	8
1956	...	...	...	24	178	193
1955	...	...	...	3	37	40
1954	...	...	...	3	10	12
1953	...	...	...	3	2	4
1952	...	...	...	5	3	7
1951	...	...	...	58	118	157
1950	...	...	...	45	36	76
1949	...	...	...	12	8	18
1948	...	...	...	50	24	69
1947	...	...	...	253	215	412
1946 and earlier...	...	...	...	148	67	205
Total	...	...	...	604	708	1201

C—OTHER INSPECTIONS.

Number of Special Inspections	...	..	...	1439
Number of Re-Inspections	...	...	...	38
Total				1477

D—INFESTATION WITH VERMIN.

Total number of individual examinations in the schools by the school nurses or other authorised persons	...	...	28,217
Total number of individual pupils found to be infested	...	...	58
Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	...	...	NIL
Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	..	...	NIL

TABLE II.

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION.

Defect Code No.	Defect or Disease	Periodic Inspections		Special Inspection	
		Number of defects		Number of defects	
		Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
	(1)	(2)	(3)	(4)	(5)
4	Skin	116	14	—	—
5	Eyes— (a) Vision ...	604	10	4	—
	(b) Squint ...	60	—	1	—
	(c) Other ...	37	17	—	—
6	Ears— (a) Hearing ...	24	2	3	—
	(b) Otitis Media ...	4	—	1	—
	(c) Other ...	3	2	—	—
7	Nose or Throat ...	55	219	—	6
8	Speech	37	11	8	—
9	Lymphatic Glands ...	—	29	—	2
10	Heart	5	32	—	—
11	Lungs	13	15	1	—
12	Developmental :—				
	(a) Hernia ...	3	—	—	—
	(b) Other... ...	12	39	1	—
13	Orthopaedic :—				
	(a) Posture ...	114	64	3	—
	(b) Feet	135	50	—	1
	(c) Other... ...	48	8	—	—
14	Nervous System :—				
	(a) Epilepsy ...	5	—	—	—
	(b) Other... ...	—	—	—	—
15	Psychological :—				
	(a) Development ...	27	42	1	1
	(b) Stability ...	6	1	1	—
16	Abdomen	—	—	—	—
17	Other	—	—	—	—

TABLE III.

ATTENDANCE OF PUPILS ATTENDING MAINTAINED PRIMARY SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

Group 1.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	36
Errors of refraction (including squint)	1564
Total	1600
Number of pupils for whom spectacles were prescribed	675

Group 2.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	12
(b) for adenoids and chronic tonsillitis... ..	286
(c) for other nose and throat conditions	5
Received other forms of treatment ...	37
Total	340
Total number of pupils in schools who are known to have been provided with hearing aids.	
(a) in 1961	1
(b) in previous years	4

Group 3.—ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
Pupils treated at clinics or out-patients departments	568
Pupils treated at school for postural defects	99
Total	667

Group 4.—DISEASES OF THE SKIN (excluding uncleanness for which see Table I—D)

	Number of cases known to have been treated
Ringworm—(i) Scalp	—
(ii) Body	2
Scabies	1
Impetigo	21
Other skin diseases	296
Total	320

Group 5.—CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics ...	289*

* A full School Psychological Service has been provided and many pupils previously seen at the Child Guidance Centre are now dealt with by the Service.

Group 6.—SPEECH THERAPY

Pupils treated by Speech Therapists ...	156
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Group 7.—OTHER TREATMENT GIVEN

(a) Pupils with minor ailments ...	326
(b) Pupils who received convalescent treatment under School Health Service arrangements ...	NIL
(c) Pupils who received B.C.G. vaccination	1357
(d) Other than (a), (b) and (c) above ...	NIL

TABLE IV.

DENTAL INSPECTION AND TREATMENT

Number of pupils inspected by the Authority's Dental Officers.

(a) At Periodic Inspections	...	...	...	...	...	14484
(b) As Specials	...	...	...	...	...	1354
				Total (1)	...	15838
Number found to require treatment	...	...	...	...	...	6516
Number offered treatment	...	...	...	...	...	4872
Number actually treated	...	...	...	...	...	3465
Attendances made by pupils for treatment, including those recorded at heading 11 (h)	...	...	...	...	...	9993
Half-days devoted to : Periodic (School) Inspection	...	...	...	...	...	118
Treatment	...	...	...	...	...	1348
				Total (6)	...	1466
Fillings : Permanent Teeth	...	...	...	...	...	7128
Temporary Teeth	...	...	...	...	...	787
				Total (7)	...	7915
No. of teeth filled : Permanent Teeth	...	...	...	...	...	6576
Temporary Teeth	...	...	...	...	...	729
				Total (8)	...	7305
Extractions : Permanent Teeth	507 caries 255 orthodontic	}				762
Temporary Teeth	...	...	...	...	...	1480
				Total (9)	...	2242
Administration of general anaesthetics for extraction	...	...	...	...	...	866
Orthodontics :						
(a) Cases commenced during the year	...	...	...	...	...	68
(b) Cases brought forward from previous year	...	...	...	...	...	95
(c) Cases completed during the year	...	...	...	...	...	59
(d) Cases discontinued during the year	...	...	...	...	...	22
(e) Pupils treated with appliances	...	...	...	...	...	163
(f) Removable appliances fitted	...	...	...	...	...	119
(g) Fixed appliances fitted	...	...	...	...	...	NIL
(h) Total attendances	...	...	...	...	...	988
Number of pupils supplied with artificial dentures	...	...	...	...	...	56
Other operations :						
Permanent teeth	1927
Temporary teeth	466
				Total (13)	...	2393

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